11/13/2007 12:46

Image# 27990906025

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines National Association of Insurance and Financial Advisors Political Action Commit-2901 Telestar Court ADDRESS (number and street) Check if different than previously Falls Church VA 22042 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00005249 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 10 0 1 2007 10 3 1 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Peter C. Browne Type or Print Name of Treasurer Electronically Filed by Peter C. Browne 11 13 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

Image# 27990906026

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS
Page 2

Report Covering the Period: From:	01 2007	To: 0 31 2007
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1 Y2007 Y		138478.22
(b) Cash on Hand at Begining of Reporting Period	226686.82	
(c) Total Receipts (from Line 19)	105555.99	862734.53
(d) Subtotal (add lines 6(b) and		
6(c) for Column A and Lines 6(a) and 6(c) for Column B)	332242.81	1001212.75
Total Disbursements (from Line 31)	86661.34	755631.28
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	245581.47	245581.47
Debts and Obligations owed TO		
the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
the committee (Itemize all on Schedule C and/or Schedule D)	28676.26	
· ·		

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Commit-

tee

Report Covering the Period:

From:

м м 1 0 01

^Y 2 0 0 7

To:

м м 1 0 ^D 3 1

^Y 2007

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	33978.51	268569.45
(ii) Unitemized	69077.48	591665.08
(iii) TOTAL (add Lines 11(a)(i) and (ii)	103055.99	860234.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	2500.00	2500.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	105555.99	862734.53
Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	105555.99	862734.53
0. Total Federal Receipts (subtract Line 18(c) from Line 19)	105555.99	862734.53

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 46961.34 157748.78 Expenditures..... (c) Total Operating Expenditures 46961.34 157748.78 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 594500.00 39000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 27. Loans Made..... 0.00 28. Refunds of Contributions To: Individuals/Persons Other 700.00 3382.50 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 700.00 3382.50 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements.....

30. Federal Election Activity (2 U.S.C 431(20))

- (a) Shared Federal Election Activity (from Schedule H6)
 - (i) Federal Share
- (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....
- 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..
- 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....

86661.34	

0.00

0.00

0.00

0.00

86661.3	34

755631.28

0.00

0.00

0.00

0.00

755631.28

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	105555.99	862734.53
34.	Total Contribution Refunds (from Line 28(d))	700.00	3382.50
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	104855.99	859352.03
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	46961.34	157748.78
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	46961.34	157748.78

SCHEDULE A (FEC Form 3X)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 173
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Statemer for commercial purposes, other than using the name	ents may and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Final tee	ncial Ac	dvisors Political Action Comr	nit-
۹.	Full Name (Last, First, Middle Initial) Ms. Robelynn H. Abadie	Date of Receipt		
	Mailing Address 4933 Antioch Blvd.			10 10 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489427
	Baton Rouge L	LA	70817	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			21.00
	Self-employed 1	ccupation surance		Payroll Deduction
			Year-to-Date ▼	
	Primary General Other (specify) ▼		359.00	
3.	Full Name (Last, First, Middle Initial) Mr. Michael J. Ables, LUTCF	Date of Receipt		
	Mailing Address PO Box 2205	10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	•	State	Zip Code	Transaction ID: R489428
		CA	93424-2205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			105.00
	Self-employed 1	ccupation		Payroll Deduction
		surance	Year-to-Date ▼	-
	Primary General	ggiogato		
	Other (specify) ▼	1 1	1050.00	
D .	Full Name (Last, First, Middle Initial) Mr. Paul Adams			Date of Receipt
	Mailing Address 5101 Missy Maric Lane			M M / D D / Y Y Y Y Y Y 1 1 0 1 0 2 0 0 7
	•	State	Zip Code	Transaction ID: R486990
	<u>Las Vegas</u>	NV	89130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			150.00
	Self-employed *	ccupation surance		Payroll Deduction
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		876.00	
s	UBTOTAL of Receipts This Page (optional))	276.00
			·	
T	OTAL This Period (last page this line number only).		>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 173
ITEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		s. see or any pointed committee to	Co Communication of the control
National Association of Insurance and Fi	nancial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial)			Date of Descript
Mr. James M. Allen Mailing Address 414 McCall Street	Date of Receipt		
			10 10 2007
City Waukesha	State WI	Zip Code	Transaction ID: R488581
FEC ID number of contributing		53186-6009	Amount of Each Receipt this Period
federal political committee.	C		30.00
Name of Employer	Occupation	n	Payroll Deduction
Self-employed 7	Insurance		_
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify)		300.00	
	-	0 0 0 0 0 0 0	1
Full Name (Last, First, Middle Initial) 3. Ms. Carol A. Anderson, LUTCF, CFP			Date of Receipt
Mailing Address 717 N. 87th St.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: R490094
<u>Omaha</u>	NE	68114	Amount of Each Receipt this Period
FEC ID number of contributing	С		50.00
federal political committee.	<u></u>		
Name of Employer Self-employed	Occupation	n	Payroll Deduction
	Insurance		<u> </u>
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
Other (specify)		500.00	
Full Name (Last, First, Middle Initial) Mr. Robert B. Anderson, CLU			Date of Receipt
Mailing Address 1456 Old Boones Creek	Road		M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R490088
Jonesborough	TN	37659	Amount of Each Receipt this Period
FEC ID number of contributing	С		50.00
federal political committee.	<u> </u>		
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
Primary General	Aggregate		1
Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)		>	130.00
TOTAL This Period (last page this line number on	ly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
••	EMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δι	ny information copied from such Reports and State	ements may	y not be sold or used by any perso	
or	ny information copied from such Reports and State for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and Fittee	nancial A	dvisors Political Action Com	mit-
^	Full Name (Last, First, Middle Initial)			Data of Danaint
Α.	Mr. William C. Anderson, LUTCF Mailing Address 205 Whippoorwill Lane			Date of Receipt
	walling Address 205 Willippoorwill Larie			10 10 2007
	City	State	Zip Code	Transaction ID: R490439
	Altamonte Spgs	FL	32701-7827	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer	Occupation	 1	Payroll Deduction
	Self-employed	Insurance		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	_ · · ·	450.00	
	Other (specify) ▼		+00.00	
— В.	Full Name (Last, First, Middle Initial) Mr. William R. Anderson			Date of Receipt
	Mailing Address 1842 Vermont Ave NW	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: R491523
	Washington	DC	20001-5006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.83
	Name of Employer Self-employed	Occupation	1	Check
	Seir-employed	Insurance		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	_ · · ·	395.77	
	Other (specify)	0 0		
С.	Full Name (Last, First, Middle Initial) Mr. William R. Anderson			Date of Receipt
٥.	Mailing Address 1842 Vermont Ave NW			M M / D D / Y Y Y Y
				10 31 2007
	City	State	Zip Code	Transaction ID: R491729
	Washington	DC	20001-5006	Amount of Each Receipt this Period
	FEC ID number of contributing	С		20.83
	federal political committee.			
	Name of Employer Self-employed	Occupation		Check
Illisurai		Insurance		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	_ · · ·	395.77	
	Calc. (opcolly) \		0 0 0 0 0 0 0	
				20.00
s	UBTOTAL of Receipts This Page (optional)			66.66
T	OTAL This Period (last page this line number onl	y)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 173
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial)			Data of Descript
Mr. Russell W. Arman, CFP Mailing Address 2111 Sherman Dr			Date of Receipt
			10 24 2007
City	State	Zip Code	Transaction ID: R491596
Bismarck	ND	58504-3103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		275.00
Name of Employer Self-employed	Occupatio		Credit Card
	Insuranc	-	_
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
Other (specify) ▼		275.00	
Full Name (Last, First, Middle Initial) 3. Mr. Douglas Austin, CLU			Date of Receipt
Mailing Address Suite 9 Kite Hill Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: R489300
Santa Cruz	CA	95060-1418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		22.50
Name of Employer	Occupatio	n	Payroll Deduction
Name of Employer Self-employed	Insuranc		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		225.00	
	0 0	0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) Mr. Douglas E. Aycock, CLU, ChFC			Date of Receipt
Mailing Address 5113 Southwest Pkwy	# 200		M M / D D / Y Y Y Y
			10 10 2007
City <u>Austin</u>	State TX	Zip Code 78735-8915	Transaction ID: R489823
FEC ID number of contributing		78735-8915	Amount of Each Receipt this Period
federal political committee.	C		42.50
Name of Employer	Occupatio	n	Payroll Deduction
Self-employéd	Insuranc		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify) ▼	0 0	425.00	
SUBTOTAL of Receipts This Page (optional)	l		340.00
CODITION OF TROOPER THIS Lage (optional)			
TOTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
•	LIMIZED RECEIT 13		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
۸۰	w information assign from such Benerte and Stat	omonto moi	reat he hald or used by any norse	
or	ly information copied from such Reports and Stati for commercial purposes, other than using the na	ime and add	dress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. James T. Bardin, CLU, ChFC			Date of Receipt
	Mailing Address 4226 Fairway Circle			10 10 2007
	City	State	Zip Code	Transaction ID: R488491
	Tampa	FL	33624-4640	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.50
	Name of Employer	Occupation	n	Payroll Deduction
	Self-employed	Insurance		
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General	1 1	225.00	
	Other (specify) ▼	0 0	225.00	
3.	Full Name (Last, First, Middle Initial) Mr. John C. Beckwith	Date of Receipt		
	Mailing Address 1908 Greenbriar Drive	10 10 / Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: R489848
	Portage	MI	49024-5787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer Self-employed	Occupation	n	Payroll Deduction
		Insurance		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		470.00	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
J.	Mr. Michael E. Behar Mailing Address 2319 Cheshire Woods Re	4		Date of Receipt
	Willing Address 2519 Offeshire Woods Fi	u		10 10 2007
	City	State	Zip Code	Transaction ID: R489339
	Toledo	ОН	43617-1202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.50
	Name of Employer	Occupation	n	Payroll Deduction
	Self-employed	Insurance	e Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		225.00	
	Other (specify) ▼	0 0		
s	UBTOTAL of Receipts This Page (optional)			87.00
T	OTAL This Period (last page this line number on	ly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 173 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
An or	y information copied from such Reports and Staten for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee	ancial Ac	dvisors Political Action Com	mit-
΄ Α.	Full Name (Last, First, Middle Initial) Mr. Daniel C. Bell			Date of Receipt
	Mailing Address P. O. Box 1747			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488326
	Cleveland	MS	38732-1747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Salf-amployed 1	Occupation nsurance		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Kent A. Bennett	0 0		Date of Receipt
٥.	Mailing Address 280 Hollow Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: R490462
	Muncy	PA	17756-5789	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		87.50
	Solf amployed	Occupation		Payroll Deduction
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		875.00	
) .	Full Name (Last, First, Middle Initial) Mr. Robert A. Berg, CLU, LUTCF			Date of Receipt
	Mailing Address 1405 Blackberry Lane	10 10 / Y Y Y Y Y Y		
	City Stevens Point	State WI	Zip Code 54481-9140	Transaction ID: R489145 Amount of Each Receipt this Period
	EEO ID acceptance (a contribution		34401-3140	
	Todorai pontoai committee.	С		36.00 Payroll Deduction
	Solf omployed	Occupation nsurance		ayron Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 312.00	
S	UBTOTAL of Receipts This Page (optional)			148.50
т,	OTAL This Period (last page this line number only)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 173 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
			Detailed Summary Fage	13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
۸.	Full Name (Last, First, Middle Initial) Mr. Thomas C. Besselman	Date of Receipt		
	Mailing Address 6421 Perkins Rd # 2b			10 10 2007
	City Peter Pause	State	Zip Code	Transaction ID: R488966
	Baton Rouge	LA	70808-4125	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼	0 0	0 0 0 0 0 0 0	
3.	Full Name (Last, First, Middle Initial) Mr. David B. Bianchi, CLU			Date of Receipt
	Mailing Address 1125 Beldon Way	10 10 / 2007		
	City	State	Zip Code	Transaction ID: R489656
	Reno	NV	89503-3164	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
		Insurance		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	0 0	600.00	
	Full Name (Last, First, Middle Initial) Mr. Jeffrey M. Biggs, LUTCF			Date of Receipt
•	Mailing Address 6708 SW Hamptonshire			M M / D D / Y Y Y Y
	<u> </u>			10 16 2007
	City Topeka	State KS	Zip Code	Transaction ID: R491068
			66614-4463	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self-employed	Occupation		Check
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
	Primary General	Aggregate		
	Other (specify) ▼	0 0	300.00	
s	UBTOTAL of Receipts This Page (optional)			410.00
	. 3 (1 /			
T	OTAL This Period (last page this line number on	ly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 173	
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a	
			Detailed Summary Page	13 14 15 16 17
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	on for the purpose of soliciting contributions
OI	NAME OF COMMITTEE (In Full)	ame and add	aress of any political committee to	solicit contributions from such committee.
\rangle	National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. J. Blayne Bird			Date of Receipt
	Mailing Address 315 Willow Drive			10 10 2007
	City	State	Zip Code	Transaction ID: R488282
	Blackfoot	ID	83221-3907	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
В.	Full Name (Last, First, Middle Initial) Mr. Timothy P. S. Birdwell, LUTCF			Date of Receipt
	Mailing Address 3601 Parkway Terrace			10 10 2007
	City	State	Zip Code	Transaction ID: R488937
	Bryan	TX	77802-3747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Year-to-Date 🔻	
	Primary General	riggiogaic		1
	Other (specify) ▼	0 0	210.00	
C	Full Name (Last, First, Middle Initial) Ms. Sally A. Bisgard, LUTCF			Date of Receipt
Ο.	Mailing Address 529 N. Main			M M / D D / Y Y Y Y Y Y 1 1 0 1 0 2 0 0 7
	City	State	Zip Code	Transaction ID: R490311
	Waubay	SD	57273	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
s	UBTOTAL of Receipts This Page (optional)			72.00
Т	OTAL This Period (last page this line number or	nly)	·	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	w information copied from such Reports and State	emente may	y not be sold or used by any perso	
or	ly information copied from such Reports and State for commercial purposes, other than using the national states.	ame and ado	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and F tee	inancial Ad	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Harlynn N. Bjerke, LUTCF			Date of Receipt
	Mailing Address P. O. Box 144			10 10 2007
	City	State	Zip Code	Transaction ID: R488723
	Adams	ND	58210-0144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date V	
	Primary General	199.191		1
	Other (specify)		310.80	
В.	Full Name (Last, First, Middle Initial) Ms. Eleanor B. Blaylock			Date of Receipt
	Mailing Address 9439 Gay Lane			M M / D D / Y Y Y Y
				10 10 2007
	City	State	Zip Code	Transaction ID: R488526
	<u>Oil City</u>	LA	71061	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		62.50
				Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		, ajven 2 sadens
	Receipt For:		Year-to-Date V	_
	Primary General	/ iggi ogalo		1
	Other (specify) ▼		600.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Brian D. Boesiger, CSA, LUTC			Date of Receipt
Ο.	Mailing Address 7021 S. 33rd Street			M M / D D / Y Y Y Y
				10 10 2007
	City	State	Zip Code	Transaction ID: R487238
	Lincoln	NE	68516-4886	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		200.00	1
	Other (specify)		300.00	1
	IIDTOTAL of Descripts This Descriptor II			122.50
\vdash	UBTOTAL of Receipts This Page (optional)			
_	OTAL This Period (last page this line number on	lv)	.	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
<u> </u>	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Fitee	nancial A	dvisors Political Action Comr	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. Lane Boozer			Date of Receipt
•	Mailing Address 1400 N Corinth St Ste 10	9		M M / D D / Y Y Y Y
	City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R488236
	Corinth	TX	76208-5444	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
				Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		430.00	
3.	Full Name (Last, First, Middle Initial) Mr. Terry A. Boulter, CLU, ChFC,			Date of Receipt
	Mailing Address 9037 N Silver Lake Drive	!		10 10 / 2007
	City	State	Zip Code	Transaction ID: R488590
	Cedar Hills	<u>UT</u>	84062-8788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.50
	Name of Employer Self-employed	Occupation		Payroll Deduction
		Insurance		4
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		225.00	
 C.	Full Name (Last, First, Middle Initial) Mr. Guy S. Bowering			Date of Receipt
	Mailing Address 129 Woodland Hills Blvd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490410
	Madison	MS	39110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.50
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		e Year-to-Date ▼	1
	Primary General			
	Other (specify) ▼		225.00	
S	UBTOTAL of Receipts This Page (optional)			95.00
_			·	
T	OTAL This Period (last page this line number onl	ly)	>	

_	DUEDLUE A /EEO E OY			FOR LINE NUMBER: PAGE 16 / 173
5(CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	
•			Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
An or	y information copied from such Reports and Stati for commercial purposes, other than using the na	ements may	/ not be sold or used by any perso tress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee
.	•	arro arra aac	areas or any pontion committee to	Solicit Containadachia Horri Cachi Committees.
/	NAME OF COMMITTEE (In Full)		duine de Belizia et Anziero Como	!a
Ϊ	National Association of Insurance and Fi	nancial A	dvisors Political Action Comi	nit-
_				
Δ	Full Name (Last, First, Middle Initial) Mr. John J. Bradley, CLU			Date of Receipt
٠.	Mailing Address 148 Grove Street			−
	Mailing Address 146 Grove Street			10 10 2007
	City	State	Zip Code	Transaction ID: R489482
	Westwood	MA	02090	
		IVIA	02090	Amount of Each Receipt this Period
	FEC ID number of contributing	C		41.66
	federal political committee.			
	Name of Employer	Occupation	n	Payroll Deduction
	Name of Employer Self-employed	Insurance		
	Receipt For:		Year-to-Date ▼	-
	Primary General	7.991.0941.0	real to Bate V	
	Other (specify)		416.60	
	curer (epociny) •			
	Full Name (Last, First, Middle Initial)			
3.	Mr. Gary A. Bramon, CLU, ChFC			Date of Receipt
	Mailing Address 269 San Felipe Way			M M / D D / Y Y Y Y
	Zoo Garri Gipe Way			10 10 2007
	City	State	Zip Code	Transaction ID: R490045
	Novato	CA	94945-1687	Amount of Each Receipt this Period
		U/ (0.10.10.1001	Amount of Each receipt this i choc
	FEC ID number of contributing federal political committee.	C		50.00
	rederal political committee.			
	Name of Employer	Occupation	n	Payroll Deduction
	Self-employed	Insurance	e Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	l	500.00	
				'
	Full Name (Last, First, Middle Initial)			
Э.	Mr. John G. Brandt, LUTCF, FIC			Date of Receipt
	Mailing Address 2103 Sunset Lane			M M / D D / Y Y Y Y
				10 10 2007
	City	State	Zip Code	Transaction ID: R489226
	<u>La Crosse</u>	WI	54601	Amount of Each Receipt this Period
	FEC ID number of contributing			5.10
	federal political committee.	C		5.10
		-		Payroll Deduction
	Name of Employer Self-employed	Occupation		- ay.o. 2 oddono.
		Insurance	<u> </u>	_
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	275.10	
	Other (specify) ▼		273.10	
				96.76
S	UBTOTAL of Receipts This Page (optional)		·····	90.70
T	OTAL This Period (last page this line number on	ly)	>	

SCHEDULE A (FEC	Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 173
ITEMIZED RECEIPT	•	or each category of the	(check only one)
	_	Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from suc	ch Reports and Statements may	not be sold or used by any person	on for the purpose of soliciting contributions
or for commercial purposes, oth	er than using the name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In		duinera Dalitical Antion Com	
tee	insurance and Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle			2. (2
Mr. William J. Brannon, CLU,C			Date of Receipt
Mailing Address 5215 Mo	ockingbira Hoad		10 10 2007
City	State	Zip Code	Transaction ID: R490117
Greensboro	NC	27406	Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.	ng C		23.10
Name of Employer	Occupation	 1	Payroll Deduction
Name of Employer Self-employed	Insurance		
Receipt For:		e Year-to-Date ▼	
Primary Gene Other (specify) ▼	eral	231.00	1
Other (specify)	0 0	0 0 0 0 0 0 0	1
Full Name (Last, First, Middle 3. Mr. Ronald D. Brant, CLU, LU			Date of Receipt
Mailing Address 10234 H			M M / D D / Y Y Y Y
			10 10 2007
City	State	Zip Code	Transaction ID: R490204
Maybee	MI	48159-9777	Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.	ng C		208.00
Name of Familian			Payroll Deduction
Name of Employer Self-employed	Occupation Insurance		
Receipt For:		e Year-to-Date ▼	
Primary Gene	eral	2180.00	1
Other (specify)		2100.00]
Full Name (Last, First, Middle	e Initial)		
Mr. Guy J. Brickman	·		Date of Receipt
Mailing Address 12040 P	iccadilly Pl		10 11 2007
City	State	Zip Code	Transaction ID: R490821
<u>Davie</u>	FL	33325-5231	Amount of Each Receipt this Period
FEC ID number of contribution	ng C		250.00
federal political committee.	0		
Name of Employer Self-employed	Occupation		Credit Card
	Insurance		
Receipt For: Primary Gene		e Year-to-Date ▼	,
Other (specify)		250.00	
SUBTOTAL of Receipts This F	Page (optional)		481.10
CODICINE OF HOOGING THIS I	ago (optional)		
TOTAL This Period (last page	this line number only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 173
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and S	tatements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and add	aress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial)			
Mr. Frank H. Briggs, Jr.,CLU, C Mailing Address 2610 Bohler Rd NW			Date of Receipt
ZOTO BOTTIEL NO TWV			10 10 2007
City	State	Zip Code	Transaction ID: R490188
Atlanta	GA	30327-1418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For:	Insurance Aggregate	e Agent e Year-to-Date ▼	-
Primary General	7.199.094.0		1
Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Mr. Delford G. Britton	•		Date of Receipt
Mailing Address 1736 Jefferson Street			10 10 / 2007
City	State	Zip Code	Transaction ID: R488829
Napa	CA	94559-1703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		21.00
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
Primary General	Aggregate		1
Other (specify) ▼		210.00	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mr. Daryl W. Broberg, MDRT Mailing Address 1531 3rd St.			M M / D D / Y Y Y Y
	0		10 10 2007
City <u>S</u> utherland	State NE	Zip Code 69165	Transaction ID: R490028 Amount of Each Receipt this Period
FEC ID number of contributing		00100	
federal political committee.	C		25.00
Name of Employer	Occupation	n	Payroll Deduction
Self-employed Self-employed	Insurance		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	, [
Other (specify)		250.00	
SUBTOTAL of Receipts This Page (optional)			96.00
CODITION TO THE CONTROL THIS Fage (Uplicital)			
TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
••	LIMIZED HEOLII 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	w information copied from such Poperts and Stat	omonte may	not be cold or used by any perce	
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and ado	lress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	National Association of Insurance and Fitee	nancial Ad	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Albert B. Brodbeck, CLU			Date of Receipt
	Mailing Address 56 Dundee Road			10 10 2007
	City	State	Zip Code	Transaction ID: R489581
	Stamford	CT	06903-3623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.50
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		000.00	1
	Other (specify) ▼	0 0	220.00	
В.	Full Name (Last, First, Middle Initial) Mr. C. Robert Brown, Sr.			Date of Receipt
	Mailing Address 8675 WestCott			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488278
	Germantown	TN	38138-7738	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		62.50
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		005.00	1
	Other (specify) ▼		625.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) Mr. James Walter Brown, LUTCF			Date of Receipt
	Mailing Address 6334 Deveron Drive			10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488359
	Charlotte	NC	28211-4612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		23.10
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
			Year-to-Date ▼	
	Primary General Other (specify) ▼		231.00]
s	UBTOTAL of Receipts This Page (optional)			103.10
H	OTAL This Period (last page this line number on			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Statement for commercial purposes, other than using the name ar	its may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Finance	cial Ac	dvisors Political Action Com	nit-
Α.	Full Name (Last, First, Middle Initial) Mr. Michael O. Brown, LUTCF Mailing Address 6512 Nell 3 City Sta Edmond Or FEC ID number of contributing federal political committee. Name of Employer Self-employed Occulinsu	K upation urance	Zip Code 73013 n e Agent Year-to-Date ▼ 600.00	Date of Receipt M M M / 10 / 2007 Transaction ID: R489965 Amount of Each Receipt this Period 60.00 Payroll Deduction
3.	Self-employéd Insu Receipt For: Primary General	upation	Zip Code 98541 n e Agent • Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Self-employed Insu	upation urance	Zip Code 68701-4093	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SI	UBTOTAL of Receipts This Page (optional)			127.50
T	OTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	r not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\angle	National Association of Insurance and F tee	inancial Ad	dvisors Political Action Com	mit-
A.				Date of Receipt
	Mailing Address 2730 Ardon Ln			10 10 2007
	City	State	Zip Code	Transaction ID: R490014
	Casper	WY	82609-3902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		470.00	1
	Other (specify) ▼		470.00	
В.	Full Name (Last, First, Middle Initial) Mr. James A. Buchan, CLU, ChFC			Date of Receipt
ъ.	Mailing Address 5716 W. Orlando Circle			M M / D D / Y Y Y Y
	Walling Address 57 TO W. Offarido Officie			10 2007
	City	State	Zip Code	Transaction ID: R489670
	Broken Arrow	OK	74011-1149	Amount of Each Receipt this Period
	FEC ID number of contributing	С		60.00
	federal political committee.	<u> </u>		
	Name of Employer Self-employed	Occupation	1	Payroll Deduction
	Self-employed	Insurance	e Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	600.00	1
	Other (specify)	0 0		
C.	Full Name (Last, First, Middle Initial) Mr. Robert M. Burd			Date of Receipt
	Mailing Address 22 Cedarwood Dr			10 10 2007
	City	State	Zip Code	Transaction ID: R489068
	Watseka	IL	60970-9740	Amount of Each Receipt this Period
	FEC ID number of contributing	С		21.00
	federal political committee.	C		
	Name of Employer	Occupation	1	Payroll Deduction
	Self-employed 5	Insurance	e Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	210.00	
	Other (specify)			1
	L			
s	UBTOTAL of Receipts This Page (optional)			123.00
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Ιт	OTAL This Period (last page this line number or	lv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 173 (check only one) X 11a 11b 11c 12
۸۵	y information copied from such Reports and Stat	tomonto mo		13 14 15 16 17
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
۷.	Full Name (Last, First, Middle Initial) Mr. Jaford D. Burgad, LUTCF			Date of Receipt
	Mailing Address 3842 N. 10th St.	Otata	7'- 0-1-	10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Fargo	State ND	Zip Code 58102-1044	Transaction ID: R488722 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30102 1077	30.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
3.	Full Name (Last, First, Middle Initial) Mr. William D. Burke, CLU, CFP(r			Date of Receipt
	Mailing Address 2216 Nelda Way			10 10 7 2007
	City	State	Zip Code	Transaction ID: R489435
	Alamo	CA	94507	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance	e Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
) .	Full Name (Last, First, Middle Initial) Mr. Eugene H. Burkett, LUTCF			Date of Receipt
	Mailing Address PO Box 921			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490398
	Felton	CA	95018-0921	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		Fayron Deduction
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 210.00	
SI	UBTOTAL of Receipts This Page (optional)			72.00
T	OTAL This Period (last page this line number on	ıly)	>>	

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23 / 173
ıт	EMIZED RECEIPTS	or each category of the	(check only one)
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			13 14 15 16 17
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and addr		nts may not be sold or used by any personand address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)		
\rangle	National Association of Insurance and Finance	cial Advisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Ms. Donna J. Burrill, CLU, ChFC,		Date of Receipt
	Mailing Address P.O.BOX 143		10 10 2007
	City	ate Zip Code	Transaction ID: R490222
	FORT COLLINS C	O 80522-0143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		30.00
	Self-employed	upation urance Agent	Payroll Deduction
		gregate Year-to-Date ▼	
	Primary General	, - 5	1
	Other (specify) ▼	300.00	
В.	Full Name (Last, First, Middle Initial) Mr. Michael J. Bussard		Date of Receipt
	Mailing Address 3029 Flagstone Drive		10 10 2007
	City	ate Zip Code	Transaction ID: R490717
	Franklin Ti	N 37069	Amount of Each Receipt this Period
	FEC ID number of contributing		
	federal political committee.		250.00 Check
	Self-employed 1	upation urance Agent	Official
	Receipt For: Ago	gregate Year-to-Date ▼	
	Primary General		1
	Other (specify) ▼	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mrs. Evelyn Butler, CLTC, LUTC		Date of Receipt
	Mailing Address 10 Lincoln Ave.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City St	ate Zip Code	Transaction ID: R488448
	Vernon N.	•	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.20
	Name of Employer	upation	Payroll Deduction
	Solf amployed	urance Agent	
		gregate Year-to-Date V	
	Primary General	grogato rear-to-date V	,
	Other (specify) ▼	252.00	
			205 20
s	UBTOTAL of Receipts This Page (optional)		305.20

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 24 / 173
		Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
		zotanos cammary rago	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	itements may	not be sold or used by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		решения сельшиние не	
National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) A. Mr. Robert D. Buxbaum, CLU, ChFC			Date of Receipt
Mailing Address 4 Linwood Rd.			10 10 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: R489626
Wellesley	MA	02181-2519	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		21.00
Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		040.00	1
Other (specify) ▼	0 0	210.00	
Full Name (Last, First, Middle Initial) 3. Mr. Robert C. Buxman, LUTCF			Date of Receipt
Mailing Address 12690 NW Lorraine Dr.			10 10 2007
City	State	Zip Code	Transaction ID: R490291
<u>Portland</u>	OR	97229	Amount of Each Receipt this Period
FEC ID number of contributing	<u></u>		21.00
federal political committee.	C		21.00
Name of Employer	Occupation	1	Payroll Deduction
Self-employed	Insurance	e Agent	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		260.00	
Other (specify)	0 0		
Full Name (Last, First, Middle Initial) Ms. Amy K. Byrne			Date of Receipt
Mailing Address 900 N Shoreline Blvd			10 10 2007
City	State	Zip Code	Transaction ID: R489353
Mountain View	CA	94043-1933	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer	Occupation	1	Payroll Deduction
Self-employed 1	Insurance	e Agent	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	· · ·	250.00	
Other (specify) ▼		200.00	
			2=22
SUBTOTAL of Receipts This Page (optional)		·····	67.00

SCHEDULE A (FEC Form 3X)			llas concrete cobadula(s)	FOR LINE N		PAGE 25 / 173
	ITEMIZED RECEIPTS		or each category of the	(check only o	- · -	I 🗖
••	LIMIZED HEOLII 10		Detailed Summary Page	X 11a	11b	11c 12 15 16 17
Δr	ny information copied from such Reports and Statemer	nts may	y not be sold or used by any nerso			
or	for commercial purposes, other than using the name a	and add	dress of any political committee to	solicit contributi	ons from s	uch committee.
\setminus	NAME OF COMMITTEE (In Full)					
	National Association of Insurance and Finance	cial A	dvisors Political Action Com	mit-		
	Full Name (Last, First, Middle Initial)			Data of D		
Α.	Mr. David D. Cameron, LUTCF Mailing Address 1142 FAIRVIEW AVE.			Date of R		/ Y Y Y Y
	Mailing Address 142 FAIRVIEW AVE.			10	10	2007
	City St	ate	Zip Code	Transaction	on ID: R4	90164
	Rupert ID)	83350			ceipt this Period
	FEC ID number of contributing federal political committee.					6.00
	Name of Employer Occ	upation	 1	Payroll De	eduction	
	Self-employed 1		e Agent			
	Receipt For: Agg	gregate	Year-to-Date ▼			
	Primary General		252.00	1		
	Other (specify) ▼	0 0	232.00			
— В.	Full Name (Last, First, Middle Initial) Mr. Christopher D. Campbell, CLU, ChFC			Date of R	eceipt	
	Mailing Address 2511 Brandon Road			M M M /		2007
	City St	Zip Code	Transaction			
	Upper Arlington O		43221			ceipt this Period
	FFC ID number of contribution			76		· · · · · ·
	federal political committee.					4.25
	Name of Employer	upation	า	Payroll De	duction	
	Self-employed	•	e Agent			
			Year-to-Date ▼			
	Primary General		070.00	1		
	Other (specify) ▼		272.00			
_	Full Name (Last, First, Middle Initial)					
C.	Mr. Daniel J. Carlberg, CLU, ChFC,			Date of R		
	Mailing Address 550 E Chapman Ave Ste C			10	30	2007
	City St	ate	Zip Code	Transaction		91809
	<u>Orange</u> C.	A	92866-1641			ceipt this Period
	FEC ID number of contributing			1		250.00
	federal political committee.					230.00
	Name of Employer Occ	upation	<u> </u>	Credit Ca	rd	
	Solf amplayed 1		e Agent			
			Year-to-Date ▼			
	Primary General		250.00	1		
Other (specify) ▼			250.00			
Г	I					
s	UBTOTAL of Receipts This Page (optional)					260.25
\vdash	-		•			
TOTAL This Period (last page this line number only)						

91	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 26 / 173		
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)		
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12		
			Detailed Summary Page	13 14 15 16 17		
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any person			
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
\rangle	National Association of Insurance and I tee	inancial A	dvisors Political Action Com	mit-		
Α.	Full Name (Last, First, Middle Initial) Ms. Cecilia H. Carlton, LUTCF			Date of Receipt		
	Mailing Address P. O. Box 636			10 10 2007		
	City	State	Zip Code	Transaction ID: R489529		
	Hazlehurst	MS	39083-0636	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		42.50		
	Name of Employer Self-employed	Occupation		Payroll Deduction		
	Receipt For:		Year-to-Date ▼	_		
	Primary General	00 0		1		
	Other (specify) ▼	1	305.00			
				"		
В.	Full Name (Last, First, Middle Initial) Ms. Kelli J. Carmichael, CLU, LUTCF			Date of Receipt		
	Mailing Address 2914 S Coffman			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: R490377		
	Casper	WY	82604-4733	Amount of Each Receipt this Period		
	FEC ID number of contributing			00.50		
	federal political committee.	C		22.50		
	Name of Employer	Ossunation		Payroll Deduction		
	Name of Employer Self-employed	Occupation Insurance				
	Receipt For:		e Year-to-Date ▼	-		
	Primary General	Aggregate	Teal to Bate V	1		
	Other (specify) ▼		475.00			
				1		
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Jeffrey P. Case, LUTCF			Date of Receipt		
	Mailing Address 1311 33rd Avenue S.W	10 10 2007				
	City	State	Zip Code	Transaction ID: R489415		
	Minot	ND	58701-7266	Amount of Each Receipt this Period		
		110	007017200	Amount of Each receipt this renou		
	FEC ID number of contributing federal political committee.	C		27.00		
	Name of Employer	Occupation	<u> </u>	Payroll Deduction		
	Self-employed	Insurance	e Agent			
	Receipt For:		Year-to-Date ▼	7		
	Primary General		070.00	1		
	Other (specify) ▼		270.00			
s	UBTOTAL of Receipts This Page (optional)			92.00		
\vdash				-		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 27 / 173
	ITEMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED REGEN 10		Detailed Summary Page	X 11a 11b 1	11c 12 15 16 17
Ar	y information copied from such Reports and Statem	ents may	not be sold or used by any perso	n for the purpose of soliciting	na contributions
or	for commercial purposes, other than using the name	e and add	dress of any political committee to	solicit contributions from su	uch committee.
\setminus	NAME OF COMMITTEE (In Full)				
	National Association of Insurance and Finatee	incial Ad	dvisors Political Action Com	nit-	
^	Full Name (Last, First, Middle Initial)			Date of Receipt	
Α.	Ms. Mary C. Castiglione, RHU Mailing Address 33 Muirfield Ct.			M M / D D	/ Y Y Y Y
	Walling Address 33 Mair Held Ot.			10 10	2007
	City	State	Zip Code	Transaction ID: R49	0228
	Dover	DE	19904	Amount of Each Rece	eipt this Period
	FEC ID number of contributing federal political committee.	c			21.00
	Name of Employer O	ccupation	1	Payroll Deduction	
	Self-employed	surance			
		ggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		260.00		
	Other (specify)	1 1	0 0 0 0 0 0 0		
В.	Full Name (Last, First, Middle Initial) Ms. Dawn T. Chambers, LUTCF,CLU			Date of Receipt	
	Mailing Address 62 Lowell Street, Suite 4			M M / D D / 1 2	2007
	City State Zip Code			Transaction ID: R49	
	Manchester	NH	03101-1607	Amount of Each Rece	
	FEC ID number of contributing				250.00
	federal political committee.	C			250.00
	Name of Employer O Self-employed In	ccupation	1	Check	
	Self-employed Ir	surance	e Agent		
		ggregate	Year-to-Date ▼		
	Primary General		250.00		
	Other (specify) ▼	0 0	0 0 0 0 0 0 0		
C.	Full Name (Last, First, Middle Initial) Mr. Mark A. Chandik, CLU, ChFC			Date of Receipt	
Ο.	Mailing Address 42 Ritz Cove Drive			M M / D D	/ Y Y Y Y
				10 10	2007
	•	State	Zip Code	Transaction ID: R48	38765
	Dana Point	CA	92629	Amount of Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C			105.00
	Name of Frankrica			Payroll Deduction	
	Name of Employer Self-employed Receipt For: Occupation Insurance Aggregation				
			Year-to-Date ▼	-	
	Primary General	1 1	505.00		
	Other (specify) ▼	0 0	525.00		
Г					276 00
s	UBTOTAL of Receipts This Page (optional)		376.00		
т	OTAL This Period (last page this line number only)				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 173 (check only one) X
An or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. Richard J. Chandik, MBA Mailing Address 1332 Shorebird Ln City Carlsbad FEC ID number of contributing federal political committee. Name of Employer Self-employed	State CA C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
3.	Full Name (Last, First, Middle Initial) Mr. Anthony D. Chapman Mailing Address 1360 Redmond Cir City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	Rome	GA	30165	Transaction ID: R487260 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00 Payroll Deduction
	Name of Employer Self-employed Receipt For: Primary General Other (specify)	Occupation Insurance Aggregate		
D .	Full Name (Last, First, Middle Initial) Ms. Queenie M. Chee, CLU, LUTCF Mailing Address 833 Waika Place	0 0		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488828
	Honolulu FEC ID number of contributing federal political committee.	C	96825-1061	Amount of Each Receipt this Period 42.00
	Name of Employer Self-employed Receipt For:	Occupation Insurance Aggregate		Payroll Deduction
	Primary General Other (specify) ▼	0 0	420.00	
s	UBTOTAL of Receipts This Page (optional)			110.50
T	OTAL This Period (last page this line number onl	lv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fittee	nancial Ad	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. James R. Christensen, Jr. Mailing Address 440 Regency Pkwy Dr #1 City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed	State NE C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 315.00	
3.	Full Name (Last, First, Middle Initial) Mr. Kim L. Christenson Mailing Address 180 SW Gibson Lane City Issaquah FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State WA C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. James C. Clabuesch	0 0	225.00	Date of Receipt
	Mailing Address 11375 Fairway Dr City Roscommon FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	State MI C Occupation Insurance Aggregate		Transaction ID: R486676 Amount of Each Receipt this Period 50.00 Payroll Deduction
s	UBTOTAL of Receipts This Page (optional)		······	177.50
T	OTAL This Period (last page this line number onl	v)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 173 (check only one) X
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and Filtee	nancial A	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Ms. Cylinda A. Clark Mailing Address 4002 San Mateo City Plano FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State TX C Occupation Insurance Aggregate		Date of Receipt M M M / 10 2007 Transaction ID: R488323 Amount of Each Receipt this Period 42.00 Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Ms. Katharine F. Clark Mailing Address 110 Cross Creek Circle City Macon FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	State GA C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: R489320 Amount of Each Receipt this Period 25.00 Payroll Deduction
D .	Full Name (Last, First, Middle Initial) Mr. Thomas R. Clark, CLU, ChFC Mailing Address 1603 22nd St Ste 202 City West Des Moines FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State IA C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		······	127.00
T	OTAL This Period (last page this line number on	v)	b	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 31 / 173 (check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	nit-
΄ Δ.	Full Name (Last, First, Middle Initial) Mr. J Michael Clinton			Date of Receipt
	Mailing Address 3525 Tilford Cir			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R486885
	Monroe	LA	71201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	0 0	455.00	
3.	Full Name (Last, First, Middle Initial) Ms. Ernestine S. Cohn, CSA			Date of Receipt
	Mailing Address 1773 139th Avenue			10 10 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488281
	San Leandro	CA	94578	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Gordon T. Colburn			Date of Receipt
	Mailing Address 126 Crystal Springs Roa			10 10 7 2007
	City San Dimas	State CA	Zip Code 91773	Transaction ID: R489733
			91773	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.50 Payroll Deduction
	Name of Employer Self-employed	Occupation		1 ayron beddelion
	Receipt For:	Insurance	e Year-to-Date V	\dashv
	Primary General Other (specify) ▼	99 19111	425.00	
SI	UBTOTAL of Receipts This Page (optional)			113.50
т	OTAL This Period (last page this line number or	nly)	>	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 32 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or i	for commercial purposes, other than using the na	me and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
/	National Association of Insurance and Fitee	nancial Ad	dvisors Political Action Com	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. John W. Collier, LUTCF			Date of Receipt
	Mailing Address 4600 Kietzke Lane, #134	-D		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489717
	Reno	NV	89502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.20
	Name of Employer Self-employed	Occupation	1	Payroll Deduction
		Insurance		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	252.00	
		0 0		1
	Full Name (Last, First, Middle Initial) Mr. Norman A. Coltrane, LUTCF			Date of Receipt
	Mailing Address 1607 Hatherleigh Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	10 10 2007
	Fayetteville	NC	28304-3643	Transaction ID: R490068 Amount of Each Receipt this Period
	FEC ID number of contributing		2000+ 00+0	
	federal political committee.	C		60.50
	Name of Employer	Occupation	,	Payroll Deduction
	Self-employed	Insurance		
	Receipt For:		Year-to-Date ▼	
	Primary General		453.75	
	Other (specify) ▼	0 0	453.75	
Э.	Full Name (Last, First, Middle Initial) Mr. Frank J. Congilose, CLU, ChFC,			Date of Receipt
	Mailing Address 2431 Atlantic Ave.			M M / D D / Y Y Y
	0.1		7: 0 1	10 19 2007
	City Manasquan	State NJ	Zip Code 08736	Transaction ID: R491217
	•		00730	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer	Occupation	1	Check
	Self-employéd *	Insurance	•	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	600.00	
		0 0	0 0 0 0 0 0 0	
	<u> </u>			685.70
SI	JBTOTAL of Receipts This Page (optional)		<u> </u>	000.70
T	OTAL This Period (last page this line number onl	v)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 / 173		
	ITEMIZED RECEIPTS		or each category of the	(check only one)	
••	LIMIZED RECEIL 13		Detailed Summary Page	X 11a 11b 11c 12	_
Δ.	ay information against from such Banarta and Sta	tomonto mo	, not be eald ar used by any parag		7
or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				_
$ \rangle$	National Association of Insurance and F	Financial A	dvisors Political Action Com	mit-	
	Full Name (Last, First, Middle Initial)				_
A.	Mr. Thomas M. Cothron			Date of Receipt	
	Mailing Address 4280 SW 20th Ave			10 09 7 7 7 7	
	City	State	Zip Code	Transaction ID: R486412	
	Ocala	FL	34474-5950	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		-250.00	
	Name of Employer	Occupation	n	- Check	
	Self-employed	Insurance			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		500.00	1	
	Other (specify)		300.00		
_	Full Name (Last, First, Middle Initial)				_
В.				Date of Receipt	
	Mailing Address 782 132nd Avenue			10 23 2007	
	City	State	Zip Code	Transaction ID: R491414	
	Hudson	WI	54017	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		180.00	
	Name of Employer Self-employed	Occupation	n	Credit Card	
	Seir-employed	Insurance			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	T	300.00		
	Other (specify) 🔻	0 0	0 0 0 0 0 0 0		
C.	Full Name (Last, First, Middle Initial)	-		Date of Receipt	
C.	Mr. Brian Counterman, LUTCF Mailing Address 7893 W. Quarto Ave.			M M / D D / Y Y Y Y	
	7093 W. Quarto Ave.			10 10 2007	
	City	State	Zip Code	Transaction ID: R488960	
	Littleton	CO	80128	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		21.00	1
	Name of Employer Self-employed Insurance Receipt For: Aggregat				J
			n	Payroll Deduction	
			e Agent		
			e Year-to-Date ▼		
	Primary General	' '	210.00	1	
	Other (specify)	0 0			
				40.00	1
s	UBTOTAL of Receipts This Page (optional))	-49.00	1
T	OTAL This Period (last page this line number o	nly)			A.

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 34 / 173	
		or each category of the	(check only one)	
П	EMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12	
		Betalled Guillinary 1 age	13 14 15 16 17	
Ar or	y information copied from such Reports and Statement for commercial purposes, other than using the name at	s may not be sold or used by any persond address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
abla	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Finance	ial Advisors Political Action Com	mit-	
Α.	Full Name (Last, First, Middle Initial) Mr. Richard R. Courtemanche, FIC		Date of Receipt	
	Mailing Address 26 Rejane Ave		10 12 2007	
	City Sta	te Zip Code	Transaction ID: R490844	
	<u>Lewiston</u> ME	04240-2512	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		300.00	
	Salt-amployed	ipation	Check	
		rance Agent regate Year-to-Date ▼		
	Primary General		1	
	Other (specify) ▼	300.00		
В.	Full Name (Last, First, Middle Initial) Ms. Nancy P. Cubberley		Date of Receipt	
	Mailing Address P O Box 5109		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Sta	te Zip Code	Transaction ID: R487344	
	Sevierville TN	37864	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		27.50	
	Self-employed 1	pation rance Agent	Payroll Deduction	
		regate Year-to-Date ▼		
	Primary General		1	
	Other (specify) ▼	255.00		
<u> </u>	Full Name (Last, First, Middle Initial) Neil M. Cubberley, CLU,ChFC,		Date of Receipt	
	Mailing Address P.O.BOX 5109		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y	
	City Sta	te Zip Code	Transaction ID: R490469	
	<u>SEVIERVILLE</u> TN	· ·	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		27.50	
	Self-employed	ipation	Payroll Deduction	
		rance Agent regate Year-to-Date ▼	\dashv	
	Primary General	Togalo Toal to Dale	- 1	
	Other (specify) ▼	255.00]	
	LIDTOTAL of Descripts This Descripts (Asthern)		355.00	
S	UBTOTAL of Receipts This Page (optional)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 173 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. David A. Culley, CLU, ChFC Mailing Address 4187 Club Drive N.E. City Atlanta FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State GA C Occupatio Insuranc Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Jack H. Curtis Mailing Address 1508 Morning Glory C	r.	420.00	Date of Receipt
City Tupelo FEC ID number of contributing federal political committee.	State MS	Zip Code 38801	1 0 1 0 2 0 0 7 Transaction ID: R490349 Amount of Each Receipt this Period 50.00
Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupatio Insuranc Aggregate		Payroll Deduction
Full Name (Last, First, Middle Initial) Mr. Vincent M. D'Addona, CLU, ChFC Mailing Address 141 Greenway Road City Lido Beach FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State NY C Occupatio Insuranc Aggregate		Date of Receipt M M J D D J Z D O 7 Transaction ID: R490090 Amount of Each Receipt this Period 85.00 Payroll Deduction
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		850.00	177.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 173 (check only one) X
An or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. Steven M. Daniel, CLU, ChFC, Mailing Address 2600 Meadowbrook Dr			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Butte	State MT	Zip Code	Transaction ID: R490127
	FEC ID number of contributing federal political committee.	C	59701-4028	Amount of Each Receipt this Period 25.20
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Mr. Charles I. Daniels, III Mailing Address 2424 Merlot Drive			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487254
	<u>Napa</u>	CA	94558	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		Fayron Deduction
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 230.00	
) .	Full Name (Last, First, Middle Initial) Mr. John A. Davidson, LUTCF, FSS Mailing Address 1497 Rancho Lane			Date of Receipt
				10 10 2007
	City Thousand Oaks	State CA	Zip Code 91362-2651	Transaction ID: R490075
	FEC ID number of contributing federal political committee.	C	31302-2031	Amount of Each Receipt this Period 105.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
s	UBTOTAL of Receipts This Page (optional)			155.20
T	OTAL This Period (last page this line number on	lv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ly information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and Finantee	ncial Ad	dvisors Political Action Com	nit-
A.	Combined Locks FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	cupation	Zip Code 54113 De Agent Year-to-Date ▼ 720.00	Date of Receipt M M M / 10 2007 Transaction ID: R489608 Amount of Each Receipt this Period 72.00 Payroll Deduction
3.	North Ogden FEC ID number of contributing federal political committee. Name of Employer Self-employed Occ Ins	cupation surance	Zip Code 84414-7596 Agent Year-to-Date ▼ 250.00	Date of Receipt M M
D.	Taylorsville FEC ID number of contributing federal political committee. Name of Employer Self-employed Occ Ins	cupation surance	Zip Code 28681-7847 2 Agent Year-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		_	152.00
т	OTAL This Period (last page this line number only)		>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 38 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
• •			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
_	NAME OF COMMITTEE (In Full)		7,7	
\rangle	National Association of Insurance and Fitee	nancial Ad	dvisors Political Action Comr	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. John R. Dean, LUTCF,CLU,			Date of Receipt
٦.	Mailing Address 1700 S.W. 15th Ave.			M M / D D / Y Y Y Y
	City	Ctoto	Zin Codo	10 10 2007
	City Willmar	State MN	Zip Code 56201	Transaction ID: R490393 Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.			
	Name of Employer Self-employed	Occupation		Payroll Deduction
		Insurance	e Agent e Year-to-Date ▼	_
	Receipt For: Primary General	Aggregate	r rear-lo-Dale ▼	
	Other (specify) ▼	0 0	537.50	
 3.	Full Name (Last, First, Middle Initial) Mr. Lawrence P. Decker, ChFC			Date of Receipt
	Mailing Address 11944 Treat Hwy			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489039
	<u>Jasper</u>	MI	49248-9724	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	-
	Primary General	riggrogato		
	Other (specify) ▼	1 1	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Paul R. Decker, CLU, ChFC			Date of Receipt
	Mailing Address Box 1832			M M / D D / Y Y Y Y
	City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R490225
	Idaho Falls	ID	83403-1832	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.40
	federal political committee.			
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	\dashv
	Primary General	riggrogato		
	Other (specify) ▼	0 0	504.00	
S	UBTOTAL of Receipts This Page (optional)		>	125.40
	,		<u> </u>	
T	OTAL This Period (last page this line number onl	ly)	>	

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial Ac	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. David V. Dellinger			Date of Receipt
	Mailing Address 3052 Stanton Circle			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: R490369
	Carmichael	CA	95608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer Self-employed	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		420.00	
_	Full Name (Last, First, Middle Initial) Mr. David S. Dickenson, II,CLU, Ch			Date of Receipt
٥.	Mailing Address 7535 Brigham Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489832
	Gates Mills	ОН	44040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	420.00	
) .	Full Name (Last, First, Middle Initial) Mr. James J. Dinsmore, CLU,LUTCF			Date of Receipt
	Mailing Address 104 Lehman Drive			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488910
	Cogan Station	PA	17728-9228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		T aylul Deduction
	Receipt For:		Year-to-Date ▼	1
	Primary General Other (specify) ▼	0 0	210.00	
s	UBTOTAL of Receipts This Page (optional)			105.00
_				

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Ms. Rosa K. Dominy Mailing Address 4015-J Washington Rd City Martinez FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State GA C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	Aggregate	255.00	
3.	Full Name (Last, First, Middle Initial) Mr. Henry Donaghy, LUTCF,CLU, Mailing Address 400 North Church Street # 208 City Charlotte FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NC C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R488850 Amount of Each Receipt this Period 23.10 Payroll Deduction
D.	Full Name (Last, First, Middle Initial) Mr. Noel Lee Dotson Mailing Address 108 Rowland Park Blvd City Wilmington FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State DE C Occupation Insurance Aggregate		Date of Receipt M M Z 3 Z 0 0 7 Transaction ID: R491417 Amount of Each Receipt this Period 125.00 Credit Card
s	UBTOTAL of Receipts This Page (optional)		>	173.60
T	OTAL This Period (last page this line number onl	v)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
A .	Full Name (Last, First, Middle Initial) Mr. Noel Lee Dotson Mailing Address 108 Rowland Park Blvd City Wilmington FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State DE C Occupation Insurance Aggregate		Date of Receipt M M M / 23 / 2007 Transaction ID: R491428 Amount of Each Receipt this Period 125.00 Credit Card
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Jill M. Douglass, LUTCF Mailing Address 2932 Sunstone St.	0 0	230.00	Date of Receipt
	City Las Vegas FEC ID number of contributing federal political committee.	State NV	Zip Code 89128-7742	Transaction ID: R489015 Amount of Each Receipt this Period 27.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
D .	Full Name (Last, First, Middle Initial) Mr. George M. Dudikoff, LUTCF Mailing Address 12897 Quail Hollow Dr City	State	Zip Code	Date of Receipt M M
	Fairfield FEC ID number of contributing federal political committee.	CA	94534	Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
s	UBTOTAL of Receipts This Page (optional)			173.00
T	OTAL This Period (last page this line number on	v)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12
			, -	13 14 15 16 17
An or	ny information copied from such Reports and Statem for commercial purposes, other than using the name	nents may e and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
/	National Association of Insurance and Fina tee	ancial Ac	dvisors Political Action Comr	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. Steven Marc Dugal, LUTCF			Date of Receipt
	Mailing Address 12238 E Millburn Ave			10 04 7 2007
	•	State	Zip Code	Transaction ID: R490607
		LA	70815-6742	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Self-employed 1	occupation rsurance		Credit Card
			Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼	0 0	250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Daniel D. Duren, CLU,ChFC,L			Date of Receipt
	Mailing Address 6537 S. 34th Street			10 10 YYYY 10 2007
		State	Zip Code	Transaction ID: R488825
		NE	68516-5428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.50
	Self-employed 1	ccupation		Payroll Deduction
	·		Year-to-Date ▼	
	Primary General		425.00	
	Other (specify) ▼	0 0		
Э.	Full Name (Last, First, Middle Initial) Mr. Thomas W. Dzik, CLU, ChFC			Date of Receipt
	Mailing Address 530 Dodge Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		State	Zip Code	Transaction ID: R488761
		MN	55118-4802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Self-employed *	ccupation		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼	0 0		
s	UBTOTAL of Receipts This Page (optional)		·····	317.50
_	OTAL This Period (last page this line number only)			
	CIAL This renow (last page this line number only)		·············	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 43 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	r not be sold or used by any perso Iress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Fire	nancial Ad	dvisors Political Action Comr	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. Brandon K. Ebert, CMFC			Date of Receipt
	Mailing Address 2003 Marc			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487545
	Salina	KS	67401-6721	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Self-employed '	Occupation		Payroll Deduction
		Insurance		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Wayne Miles Eckman, LUTCF			Date of Receipt
	Mailing Address 701 W 2350 N			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489496
	Woods Cross	UT	84087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation	1	Payroll Deduction
		Insurance		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
	Full Name (Last, First, Middle Initial) Mr. Matthew Edelstein, CLU,ChFC			Date of Receipt
_ •	Mailing Address 1550 Penstemon Ct			M M / D D / Y Y Y Y
		O	7: 0 /	10 10 2007
	City Grayslake	State IL	Zip Code 60030	Transaction ID: R487084
	•	IL.	60030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		8.50
	Salf-amployed	Occupation		Payroll Deduction
		Insurance		-
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		335.00	
S	UBTOTAL of Receipts This Page (optional)			54.50
_				
T	OTAL This Period (last page this line number only	y)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 44 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED RESENTS		Detailed Summary Page	X 11a 11b 11c 12
Δ.	ay information coning from auch Poports and Stat	omonto mov	, not be cold or used by any nore	13 14 15 16 17
or	ny information copied from such Reports and Stat- for commercial purposes, other than using the na	me and add	dress of any political committee to	osolicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
\angle	National Association of Insurance and Fi tee	nancial Ad	dvisors Political Action Com	mit-
A.				Date of Receipt
	Mailing Address 3217 Highway D65			10 10 2007
	City	State	Zip Code	Transaction ID: R490390
	Dysart	IA	52224-9750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.40
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		504.00	1
	Other (specify) ▼	0 0	504.00	
В.	Full Name (Last, First, Middle Initial) Mr. M. Jay Einstein, CLU			Date of Receipt
	Mailing Address 59 Margarete Dr.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489802
	Pittsgrove	NJ	08318-3015	Amount of Each Receipt this Period
	FEC ID number of contributing			72.00
	federal political committee.	C		72.00
	Name of Employer	Occupation	1	Payroll Deduction
	Name of Employer Self-employed	Insurance		
	Receipt For:		Year-to-Date ▼	
	Primary General	1 1	720.00	1
	Other (specify)	0 0	720.00	
C.	Full Name (Last, First, Middle Initial) Mr. Shannon J. Enders			Date of Receipt
	Mailing Address 5677 Westwood Drive			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489653
	Muskegon	MI	49441	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
Receipt For:			Year-to-Date ▼	
	Primary General		222.22	1
	Other (specify)	0 0	399.00	-
s	SUBTOTAL of Receipts This Page (optional)			164.40
Н			•	
T	OTAL This Period (last page this line number on	(v)		

S	CHEDULE A (FEC Form 3X)		Llas asperato asbadula(s)	FOR LINE NUMBER: PAGE 45 / 173	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
• • • • • • • • • • • • • • • • • • • •	EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12	
_					17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
<u></u>	NAME OF COMMITTEE (In Full)				
$ \rangle$	National Association of Insurance and Fir	nancial Ac	tvisors Political Action Com	nit-	
\angle	tee	ianciai Ac	Wisors i Ontical Action Com		
	Full Name (Last, First, Middle Initial)			D. (D.)	
Α.	Mr. Scott Engell, LUTCF			Date of Receipt	
	Mailing Address 757 Armadillo Drive			10 29 2007	
	City	State	Zip Code	Transaction ID: R491686	
	Deltona	FL	32725-2651	Amount of Each Receipt this Period	
			02720 2001		\neg
	FEC ID number of contributing federal political committee.	C		162.50	
	Name of European	0		Credit Card	
	Self-employed 1	Occupatior Insurance			
	Receipt For:		Year-to-Date ▼	\dashv	
	Primary General	Aggregate	Total to Date 🔻		
	Other (specify)		512.50		
		0 0			
	Full Name (Last, First, Middle Initial)				
В.	Mr. A. Christopher Engle, LUTCF			Date of Receipt	
	Mailing Address 4485 Orchard Creek Ct S	E		10 10 Y Y Y Y Y Y Y Y	
	City	State	Zip Code		
	Kentwood	MI	49546	Transaction ID: R488525	
		IVII	49040	Amount of Each Receipt this Period	-
	FEC ID number of contributing federal political committee.	C		25.00	
	Todoral pontion committee.			Payroll Deduction	_
	Self-employed	Occupation		ayron beduction	
		Insurance			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)		262.50		
	Other (specify)	0 0	0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)				
C.	Mr. Ronald W. Erickson, CLU, AEP,			Date of Receipt	
	Mailing Address 3002 St. Regis Rd			10 10 2007	
	City	State	Zip Code		
	Greensboro	NC	27408-4407	Transaction ID: R489962	
		INC	27400-4407	Amount of Each Receipt this Period	-
	FEC ID number of contributing federal political committee.	C		46.75	
	rederal political committee.			Payroll Deduction	-
Self-employed Insur Receipt For: Aggre		Occupatior		ayron beddellon	
		Insurance			
		Aggregate	Year-to-Date ▼		
Primary General Other (specify) ▼			517.00		
			0 0 0 0 0 0 0		
Г					_
s	UBTOTAL of Receipts This Page (optional)			234.25	
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1)		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 46 / 173 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. Byron Hyatt Erstad, Jr. Mailing Address 2510 S Nantucket Way			Date of Receipt
	City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R489949
	Boise	ID	83706-5095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.40
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 504.00	
3.	Full Name (Last, First, Middle Initial) Mr. Stephen D. Estler, CLU, ChFC			Date of Receipt
	Mailing Address 2177 NE 63 St.			10 10 7 2007
	City Fort Lauderdale	State FL	Zip Code	Transaction ID: R489975
	FEC ID number of contributing federal political committee.	C	33308	Amount of Each Receipt this Period 42.50
	Name of Employer Self-employed	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 425.00	
D.	Full Name (Last, First, Middle Initial) Mr. Robert E. Evans, CLU, ChFC,			Date of Receipt
	Mailing Address 42 Willowbrook Road			10 10 / Y Y Y Y Y Y
	City Holden	State MA	Zip Code 01520	Transaction ID: R490481 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	
S	UBTOTAL of Receipts This Page (optional)			113.90
T	OTAL This Period (last page this line number or	ıly))	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 47/1/3
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. John Everett, LUTCF			Date of Receipt
Mailing Address 531 Daniel			10 10 / 2007
City	State	Zip Code	Transaction ID: R489186
Santa Maria	CA	93454	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		420.00	
Full Name (Last, First, Middle Initial) Mr. Andre L. Faucher, CLU, ChFC			Date of Receipt
Mailing Address 46 Osprey Circle			10 10 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R489831
Palm Coast	FL	32137	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		21.00 Payroll Deduction
Name of Employer Self-employed	Occupation Insurance		Payron Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	210.00	
Full Name (Last, First, Middle Initial) Mr. Lines Robert Ferguson, Jr.			Date of Receipt
Mailing Address 500 Virginia St E Ste 11	00		10 10 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R488634
Charleston	WV	25301-2151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
SUBTOTAL of Receipts This Page (optional)			88.00
TOTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 48 / 173 (check only one)
ITEMIZED RECEIPTS	or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name are	s may not be sold or used by any persond address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Insurance and Finance tee	ial Advisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) A. Mr. Samuel B. Fields, LUTCF		Date of Receipt
Mailing Address P. O. Box 1742		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	te Zip Code	Transaction ID: R490123
<u>Tuscaloosa</u> AL	35403-1742	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		21.00
Self-employed *	pation rance Agent	Payroll Deduction
Receipt For: Agg	regate Year-to-Date ▼	1
Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) Mrs. Rebecca J. Flickinger		Date of Receipt
Mailing Address 1900 W Hart Ave	10 10 / Y Y Y Y Y Y	
City	te Zip Code	Transaction ID: R486871
<u>Orange</u> TX	77630-3639	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		17.00
Self-employed	upation rance Agent	Payroll Deduction
	regate Year-to-Date ▼	
Primary General Other (specify) ▼	238.50	
Full Name (Last, First, Middle Initial) Mr. Thomas F. Flournoy, Jr., CLU		Date of Receipt
Mailing Address 5300 Zebulon Rd		M M / D D / Y Y Y Y Y 1 Y 1 1 0 1 0 1 0 0 7
City Sta	te Zip Code	Transaction ID: R489791
Macon GA	A 31210-2199	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		42.00
Solf amployed *	pation rance Agent	Payroll Deduction
	regate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	
SUBTOTAL of Receipts This Page (optional)		80.00
TOTAL This Period (last page this line number only))	

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any info	ormation copied from such Reports and Statement of the name of the	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\	ME OF COMMITTEE (In Full) ional Association of Insurance and F	inancial A	dvisors Political Action Com	nit-
A. Full City Diat FEC fede Nam Self- Recc	Name (Last, First, Middle Initial) John A. Forbing Ing Address 23209 Charwood PI mond Bar ID number of contributing ral political committee. The of Employer -employed eipt For: Primary General Other (specify) Name (Last, First, Middle Initial) H. Larry Fortenberry, CPA,CLU,Ch Ing Address 603 Gordon PI	State CA C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: R489516 Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt
City Mac FEC fede Nam Self-	dison ID number of contributing ral political committee. The of Employer employed eipt For: Primary General Other (specify)	State MS C Occupation Insurance Aggregate		Transaction ID: R489824 Amount of Each Receipt this Period 52.50 Payroll Deduction
City Bell FEC fede Nam Self-	Name (Last, First, Middle Initial) Thomas E. Fowler, CLU, LUTCF Ing Address 13243 S.E. 51st Place Levue EID number of contributing ral political committee. The of Employer employed Leipt For: Primary General Other (specify)	State WA C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R489606 Amount of Each Receipt this Period 107.50 Payroll Deduction
SUBTO	OTAL of Receipts This Page (optional))	181.00
ΤΟΤΔΙ	L This Period (last page this line number or	lv)	>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 50 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
•	LIMIZED HEOLII 13		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
۸۰	winformation against from auch Departs and State	monto mo	, not be cold or used by any parce	
or	y information copied from such Reports and State for commercial purposes, other than using the na	me and add	frict be sold of used by any perso dress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Fittee	nancial Ad	dvisors Political Action Comr	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. Joseph P. Fox			Date of Receipt
	Mailing Address 1751 Upper 55th St, E.			10 11 2007
	City	State	Zip Code	Transaction ID: R490805
	Inver Grove Height	MN	55077	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-employed	Occupation Insurance		Check
	Receipt For:		Year-to-Date ▼	-
	Primary General Other (specify) ▼	riggregate	250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Rick L. Frank			Date of Receipt
	Mailing Address 415 S Maple PO Box 574			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488865
	<u>Paullina</u>	IA	51046-0574	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		9.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General	111	20100	
	Other (specify) ▼		234.60	
Э.	Full Name (Last, First, Middle Initial) Mr. Rick L. Frank			Date of Receipt
	Mailing Address 415 S Maple PO Box 574			10 29 7 2007
	City	State	Zip Code	Transaction ID: R491661
	Paullina	IA	51046-0574	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		144.60
	Self-employed '	Occupation Insurance		Check
	Receipt For:		Year-to-Date ▼	-
	Primary General	7.99.094.0		
	Other (specify) ▼	0 0	234.60	
s	UBTOTAL of Receipts This Page (optional)			403.60
			<u> </u>	
T	OTAL This Period (last page this line number only	y)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 51 / 173	
	ITEMIZED RECEIPTS		or each category of the	(check only one)	
•	EWIZED RECEIP 13		Detailed Summary Page		11c 12
					15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting solicit contributions from such	g contributions ch committee
<u></u>	NAME OF COMMITTEE (In Full)				
$ \rangle$	National Association of Insurance and F	inancial Ac	dvisors Political Action Com	mit_	
	tee	manda A	dvisors i diffical Action Com	1111 L -	
	Full Name (Last, First, Middle Initial)				
A.	Ms. Debra L. Franklin-Schatzki			Date of Receipt	
	Mailing Address 380 W 12th St			M M / D D /	
	Cit.	01-1-	7:- 0-4-	10 10	2007
	City Now York	State	Zip Code	Transaction ID: R49	
	New York	NY	10014	Amount of Each Rece	ipt this Period
	FEC ID number of contributing federal political committee.	C			42.00
	rederal political committee.			Daywall Daylyatian	
	Name of Employer Self-employed	Occupation	1	Payroll Deduction	
	Seil-employed	Insurance			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		420.00		
	Other (specify)	0 0	120.00		
_	Full Name (Last, First, Middle Initial)				
В.				Date of Receipt	
	Mailing Address 976 Landings Ct			M M / D D /	YYYY
				10 10	2007
	City	State	Zip Code	Transaction ID: R489828	
	Westerville	OH	43082-7429	Amount of Each Rece	ipt this Period
	FEC ID number of contributing	С			21.00
	federal political committee.	<u> </u>			
	Name of Employer	Occupation	<u> </u>	Payroll Deduction	
	Name of Employer Self-employed	Insurance			
	Receipt For:		Year-to-Date ▼		
	Primary General	1 1	010.00	1	
	Other (specify)		210.00		
			<u> </u>		
C.	Full Name (Last, First, Middle Initial) Mr. Robert L. French, LUTCF			Date of Receipt	
U .	Mailing Address 4105 Sheridan Lake Roa	ad .		M M / D D /	YYYY
	Thaining Addition 4103 Sheridan Lake 1108	iu		10 10	2007
City State		State	Zip Code	Transaction ID: R489	9463
	Rapid City	SD	57702	Amount of Each Rece	ipt this Period
	FEC ID number of contributing				20.00
Name of Employer Self-employed Occupation Insurance					30.00
		Occupation	<u> </u>	Payroll Deduction	
			Year-to-Date ▼	-	
		33 -3		1	
	Other (specify) ▼		300.00		
					20.00
s	UBTOTAL of Receipts This Page (optional)				93.00
T	OTAL This Period (last page this line number or	ıly)	>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. Donald A. Frost, PGA Mailing Address 612 A N. Pageant Drive			Date of Receipt
	City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R488539
	Orange FEC ID number of contributing federal political committee.	CA	92869-2572	Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Mr. Alan L. Fry, CLU, CFP, Mailing Address 15112 Lima Road			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490012
	Huntertown FEC ID number of contributing federal political committee.	C	46748-9711	Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
) .	Full Name (Last, First, Middle Initial) Mrs. Kelli Park Fuhrmann			Date of Receipt
	Mailing Address 647 S. Main Ave #209			10 01 7 2007
	City Sioux Falls	State SD	Zip Code 57104	Transaction ID: R491249 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		-25.00
	Name of Employer Self-employed	Occupation Insurance	e Agent	DA
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			17.00
Т	OTAL This Period (last page this line number on	v)		

SCHEDULE A (FEC Form 3X)			Harana and a sala adala (a)	FOR LINE NUMBER: PAGE 53 / 173
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full)	arrie ariu auc	liess of any political committee to	Solicit Contributions from Such Committee.
	National Association of Insurance and F	inanaial A	Aviagra Political Action Comm	nit
	tee	ilialiciai Ac	IVISOIS FOIILICAI ACLIOIT COITT	iiit-
Α.	Full Name (Last, First, Middle Initial)			Data of Descipt
Α.	Mrs. Kelli Park Fuhrmann Mailing Address 647 S. Main Ave #209			Date of Receipt
	Walling Address 647 S. Walli Ave #209			10 01 2007
	City	State	Zip Code	Transaction ID: R491250
	Sioux Falls	SD	57104	Amount of Each Receipt this Period
	FEC ID number of contributing			25.00
	federal political committee.	C		23.00
	Name of Employer	Occupation	1	⊢ CA
	Self-employed	Insurance		
	Receipt For:		Year-to-Date ▼	
	Primary General		050.00	
	Other (specify) 🔻		250.00	
В.	Full Name (Last, First, Middle Initial) Mrs. Kelli Park Fuhrmann			Date of Receipt
٥.	Mailing Address 647 S. Main Ave #209			M M / D D / Y Y Y Y
				10 10 2007
	City	State	Zip Code	Transaction ID: R487021
	Sioux Falls	SD	57104	Amount of Each Receipt this Period
	FEC ID number of contributing	С		25.00
	federal political committee.			
	Name of Employer Self-employed	Occupation	1	Payroll Deduction
	Self-employed ⁵	Insurance	e Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	250.00	
	Other (specify)		230.00	
	Full Name (Last, First, Middle Initial)			+
C.	Mr. Peter Fulchiron, CLU, LUTCF			Date of Receipt
	Mailing Address 411 San Andreas Drive			M M / D D / Y Y Y Y
	Oth.	01-1-	7in Oada	10 10 2007
	City Novato	State CA	Zip Code	Transaction ID: R490470
	•	CA	94945-1237	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	<u> </u>			Payroll Deduction
	Name of Employer Self-employed	Occupation .		1 ayron beddellon
		Insurance		-
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		2080.00	
			0 0 0 0 0 0 0	
Г				
s	JBTOTAL of Receipts This Page (optional)		.	258.00
H	1			

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)	()	Use separate schedule(s)	FOR LINE NUMBER: PAGE 54 / 173
ITEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
National Association of Insurance a tee	and Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) A. Mr. R. Keith Fulton			Date of Receipt
Mailing Address 1547 Davenport Dr			10 22 2007
City	State	Zip Code	Transaction ID: R491346
New Port Richey	FL	34655-4230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self-employed	Occupation		Check
Receipt For:	Insurance	e Agent e Year-to-Date ▼	
Primary General	riggrogate	500.00	1
Other (specify) ▼	0 0	300.00	
Full Name (Last, First, Middle Initial) 3. Mr. Lawrence J. Ganim, CIC	•		Date of Receipt
Mailing Address 45 Ironwood Rd.			10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R490958
Trumbull	CT	06611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self-employed	Occupation Insurance		Credit Card
Receipt For:		e Year-to-Date ▼	
Primary General		050.00	1
Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Mr. Roger W. Garrett	•		Date of Receipt
Mailing Address 2201 Woodlawn Ro	oad		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R489328
Lincoln	<u>IL</u>	62656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
Receipt For:		e Year-to-Date ▼	
Primary General		250.00	1
Other (specify)	0 0	230.00	
SUBTOTAL of Receipts This Page (optional	J)		775.00
TOTAL This Period (last page this line num	ber only)		
(- ,,		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 55 / 1/3
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) A. Mr. Michael J. Gates, LUTCF			Date of Receipt
Mailing Address 94 Pine Glen Rd.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R488439
Langhorne	PA	19047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Mr. Ronald L. Gay, LUTCF			Date of Receipt
Mailing Address 3000 Briarcrest Ste. 422			10 10 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R488305
Bryan	TX	77802-3000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		21.00 Payroll Deduction
Name of Employer Self-employed	Occupatio Insuranc		- Fayron Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		210.00	
Full Name (Last, First, Middle Initial) Mr. James O. Geitgey, LUTCF, FIC			Date of Receipt
Mailing Address 279 Glenmore Dr.			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R489883
<u>Springfield</u>	OH	45503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.50
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	380.00	
SUBTOTAL of Receipts This Page (optional)			88.50
TOTAL This Period (last page this line number	only)	>	

SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 56 / 173
TEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	1	,,	
National Association of Insurance an tee	d Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) A. Mr. Campbell T. Gerrish, CLU, ChFC			Date of Receipt
Mailing Address 2 Windcrest Road			M M / D D / Y Y Y Y
	0 1.1	7: 0 1	10 18 2007
City Rye	State NY	Zip Code 10580-1626	Transaction ID: R491211 Amount of Each Receipt this Period
FEC ID number of contributing		10000 1020	
federal political committee.	C		250.00
Name of Employer	Occupation	n	Check
Self-employed	Insuranc		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
		<u> </u>	4
Full Name (Last, First, Middle Initial) 3. Mr. Gregory Gianakis			Date of Receipt
Mailing Address 5315 S Conquistador	St		M M / D D / Y Y Y Y
Cit.	Ctoto	7in Codo	10 10 2007
City Las Vegas	State NV	Zip Code 89148	Transaction ID: R486771 Amount of Each Receipt this Period
FEC ID number of contributing		00140	
federal political committee.	C		25.20
Name of Employer	Occupatio	n	Payroll Deduction
Self-employed 5	Insuranc		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		252.00	
			1
Full Name (Last, First, Middle Initial) Mr. Joseph R. Giangola, CEBS			Date of Receipt
Mailing Address 1925 Pleasantview			M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	10 10 2007
<u>Ashtabula</u>	OH	44004-9719	Transaction ID: R489649 Amount of Each Receipt this Period
FEC ID number of contributing			25.00
federal political committee.	C		
Name of Employer Self-employed	Occupation		Payroll Deduction
	Insurance		4
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
Other (specify)		250.00	
			<u> </u>
SUBTOTAL of Receipts This Page (optional)			300.20
TOTAL This Period (last page this line number	er only)		
	,		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 57 / 173
ITEMIZED RECEIPTS	or each category of the	(check only one)
	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	may not be sold or used by any person address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
National Association of Insurance and Financial tee	Advisors Political Action Comm	nit-
Full Name (Last, First, Middle Initial) A. Mr. Steven Dwayne Gifford		Date of Receipt
Mailing Address P.O. Box 5027		M M / D D / Y Y Y Y
	7's Oads	10 10 2007
City State Ashland KY	Zip Code 41105	Transaction ID: R488731 Amount of Each Receipt this Period
FEC ID number of contributing		25.20
federal political committee.		Payroll Deduction
Name of Employer Occupa Self-employed Insura	ntion nce Agent	ayron beauction
-	rate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	252.00	
Full Name (Last, First, Middle Initial) 3. Mr. Keith M. Gillies, CLU, ChFC,		Date of Receipt
Mailing Address 109 W. Lakeview Dr.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State	Zip Code	Transaction ID: R489308
La Place LA	70068-2427	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		62.50
Name of Employer Occupa Self-employed		Payroll Deduction
Insura	nce Agent late Year-to-Date ▼	_
Primary General		
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) C. Constance Y. Golleher		Date of Receipt
Mailing Address PO Box 255		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State	Zip Code	Transaction ID: R487116
Mc Lean VA	22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		30.00
Name of Employer Occupa Self-employed Insura	ution nce Agent	Payroll Deduction
	ate Year-to-Date ▼	
Primary General	300.00	
Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional)	·····	117.70
TOTAL This Period (last page this line number only)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 58 / 173 (check only one)
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
<u></u>	Full Name (Last, First, Middle Initial) Mr. James W. Goodacre II, RHU, REBC			Date of Receipt
٦.	Mailing Address 10407 Fairway Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489100
	<u>Carmel</u>	CA	93923-9311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
3.	Full Name (Last, First, Middle Initial) Mr. James R. Goodrich, CLU, ChFC			Date of Receipt
	Mailing Address 1860 Beech			10 10 / 2007
	City	State	Zip Code	Transaction ID: R488569
	Mt. Pleasant	MI	48858-1280	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.50 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance	e Agent	Fayron Deduction
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		425.00	
	Full Name (Last, First, Middle Initial)			
Э.	Mr. Frederick L. Granados, LUTCF, FSS			Date of Receipt
Э.	Mr. Frederick L. Granados, LUTCF, FSS Mailing Address 1145 Davis Avenue			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Э.	Mr. Frederick L. Granados, LUTCF, FŚS Mailing Address 1145 Davis Avenue City	State	Zip Code	10 10 2007 Transaction ID: R489292
Э.	Mr. Frederick L. Granados, LUTCF, FSS Mailing Address 1145 Davis Avenue City Concord	CA	Zip Code 94518	Transaction ID: R489292 Amount of Each Receipt this Period
Э.	Mr. Frederick L. Granados, LUTCF, FŚS Mailing Address 1145 Davis Avenue City Concord FEC ID number of contributing federal political committee.	CA	94518	Transaction ID: R489292 Amount of Each Receipt this Period 42.00
C.	Mr. Frederick L. Granados, LUTCF, FSS Mailing Address 1145 Davis Avenue City Concord FEC ID number of contributing	CA C Occupation	94518	Transaction ID: R489292 Amount of Each Receipt this Period
C.	Mr. Frederick L. Granados, LUTCF, FSS Mailing Address 1145 Davis Avenue City Concord FEC ID number of contributing federal political committee. Name of Employer Self-employed	CA C Occupation	94518	Transaction ID: R489292 Amount of Each Receipt this Period 42.00
.	Mr. Frederick L. Granados, LUTCF, FSS Mailing Address 1145 Davis Avenue City Concord FEC ID number of contributing federal political committee. Name of Employer	CA C Occupation	94518 n e Agent	Transaction ID: R489292 Amount of Each Receipt this Period 42.00
S.	Mr. Frederick L. Granados, LUTCF, FSS Mailing Address 1145 Davis Avenue City Concord FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	CA C Occupation Insurance Aggregate	94518 n e Agent Year-to-Date ▼ 340.00	Transaction ID: R489292 Amount of Each Receipt this Period 42.00 Payroll Deduction

SCHEDULE A (FEC Form 3X)			Llac concrete cohodulo(a)	FOR LINE NUMBER: PAGE 59 / 173
	ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may ne and add	ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and Fir tee	ancial Ac	Ivisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Gerald C. Grant, Jr.,MBA			Date of Receipt
	Mailing Address 8560 SW 166 St.			10 05 2007
	City	State	Zip Code	Transaction ID: R490635
	Miami	FL	33157-0414	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
		<u> </u>		Check
	Self-employed *	Occupation Insurance		
			Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼	0 0	300.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Todd G. Grantham			Date of Receipt
υ.	Mailing Address 203 Brandermill Drive			M M / D D / Y Y Y Y
				10 10 2007
	City	State	Zip Code	Transaction ID: R488575
	<u>Durham</u>	NC	27713	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		115.50
	·			Payroll Deduction
	Solf amployed	Occupation •		1 dyron Boddonon
		Insurance		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
	Other (specify) ▼		605.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. George F. Griffin, LUTCF, CLF			Date of Receipt
•	Mailing Address P.O. Box 31939 St. Andre	ws Br.		M M / D D / Y Y Y Y
				10 10 2007
	City	State	Zip Code	Transaction ID: R488271
	Charleston	SC	29417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer	Occupation	1	Payroll Deduction
Self-employed		Insurance		
		Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
_	Other (specify)	0 0		1
s	UBTOTAL of Receipts This Page (optional)			290.50
\vdash			•	
T	OTAL This Period (last page this line number only	γ)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 60 / 173 (check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	nit-
΄ Δ.	Full Name (Last, First, Middle Initial) Ms. Barbara E. Gunnell, LUTCF			Date of Receipt
	Mailing Address 94903 Country Ln.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489324
	Coos Bay	OR	97420	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		235.00	
3.	Full Name (Last, First, Middle Initial) Mr. Angelo Assad Haddad			Date of Receipt
	Mailing Address 354 Garnsey Ave			10 10 / 2007
	City	State	Zip Code	Transaction ID: R489731
	Bakersfield	CA	93309-1849	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.50 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		Fayron Deduction
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	285.00	
 C.	Full Name (Last, First, Middle Initial) Mr. Kevin J. Halloran			Date of Receipt
	Mailing Address One Indian Head Plaza S	Ste. 515		10 22 7 2007
	City	State	Zip Code	Transaction ID: R491312
	Nashua Fa I I I I I I I I I I I I I I I I I I	NH	03060-1227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer Self-employed	Occupation		Check
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
	Primary General Other (specify) ▼	riggregate	875.00	
S	UBTOTAL of Receipts This Page (optional)			817.50
т	OTAL This Period (last page this line number on	ly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 173 (check only one) X
An or	ny information copied from such Reports and Stater for commercial purposes, other than using the nan	ments may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fin	ancial A	dvisors Political Action Com	mit-
Α.	Self-employéd 1	State MS C C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	Aggregate	210.00	
3.	Full Name (Last, First, Middle Initial) Mr. Steve L. Hampton, LUTCF Mailing Address P.O. Box 319			Date of Receipt 10 10 2007
	City	State WY	Zip Code	Transaction ID: R488870
	Upton FEC ID number of contributing federal political committee.	C	82730-0319	Amount of Each Receipt this Period 21.00
	Self-employéd 1	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
Э.	Full Name (Last, First, Middle Initial) Mr. Karl Erik Hansen, CLU, ChFC,			Date of Receipt
	Mailing Address 900 North Shoreline Boule	evard		10 10 2007
	City Mountain View	State CA	Zip Code 94043-1933	Transaction ID: R490357
	FEC ID number of contributing federal political committee.	C	94045-1955	Amount of Each Receipt this Period 42.50
	Self-employed 1	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 425.00	
s	UBTOTAL of Receipts This Page (optional)			84.50
T	OTAL This Period (last page this line number only	')		

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 62 / 173 (check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Ms. Sharon L. Hansen			Date of Receipt
	Mailing Address P.O. Box 1249 1219 S Second Street			10 10 7 2007
	City	State	Zip Code	Transaction ID: R489616
	Mt Vernon	WA	98273	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.50
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
3.	Full Name (Last, First, Middle Initial) Mr. Alex Hanson, CLU, ChFC,			Date of Receipt
	Mailing Address 7888 Glen Finnan Cir			10 10 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490320
	Ft Myers	FL	33912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		420.00	
 C.	Full Name (Last, First, Middle Initial) Mr. William N. Haraway			Date of Receipt
	Mailing Address 113 Fairview Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490373
	Frederick	MD	21701-4017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	1	Year-to-Date ▼	1
	Primary General Other (specify) ▼		449.50	
S	JBTOTAL of Receipts This Page (optional)			111.50
т,	OTAL This Period (last page this line number or	nlv)	•	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 63 / 173
ITEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and Statem	ments may	not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the nam	ne and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
National Association of Insurance and Finatee	ancial Ad	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial)			Data of Danairs
A. Mr. Richard Lee Harlow, CLU,CSA,CB Mailing Address 12250 Angel Wing Ct			Date of Receipt
Maining Address 12230 Angel Wing Ot			10 10 2007
City	State	Zip Code	Transaction ID: R490053
Reston	VA	20191-1102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer C	Occupation	1	Payroll Deduction
Self-employed Ir	nsurance	e Agent	
	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		252.00	
Callet (openity) 🔻			
Full Name (Last, First, Middle Initial) B. Ms. Linda S. Harris			Date of Receipt
Mailing Address PO Box 261669			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R488513
San Diego	CA	92196-1669	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		22.50
Name of Employer C Self-employed	Occupation	1	Payroll Deduction
	nsurance		
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		225.00	
			1
Full Name (Last, First, Middle Initial) C. Mr. Roger W. Hassler, LUTCF			Date of Receipt
Mailing Address 22593 County View De			M M / D D / Y Y Y Y
			10 10 2007
City	State	Zip Code	Transaction ID: R489189
San Jose	CA	95120-4510	Amount of Each Receipt this Period
FEC ID number of contributing	С		21.00
federal political committee.			Paymall Dadystics
Self-employed	Occupation		Payroll Deduction
	nsurance	•	_
Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
Other (specify)		210.00	
	4		
			85.50
SUBTOTAL of Receipts This Page (optional)		<u> </u>	- 33.30
TOTAL This Period (last page this line number only)))	. [

SCHEDULE A (FEC Form 3X	()	Use separate schedule(s)	FOR LINE NUMBER: PAGE 64 / 173
ITEMIZED RECEIPTS		or each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
National Association of Insurance a tee	nd Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) A. Mr. Thomas M. Hawco, CLU, ChFC			Data of Danairt
Mailing Address 900 Rockhurst Drive	<u> </u>		Date of Receipt
			10 10 2007
City <u>Lincoln</u>	State NE	Zip Code 68510-4114	Transaction ID: R490096
FEC ID number of contributing		00010-4114	Amount of Each Receipt this Period
federal political committee.	C		42.50
Name of Employer	Occupation	n	Payroll Deduction
Self-employed	Insurance		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		515.00	
			4
Full Name (Last, First, Middle Initial) 3. Mr. Jonathan David Haymes, LUTCF			Date of Receipt
Mailing Address 1230 s. hickory lane)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R489134
<u>Nixa</u>	MO	65714	Amount of Each Receipt this Period
FEC ID number of contributing	С		25.20
federal political committee.			Payroll Deduction
Name of Employer Self-employed	Occupation		Fayron Deduction
Receipt For:	Insurance	e Agent e Year-to-Date ▼	
Primary General	riggregate		1
Other (specify) ▼		252.00	
Full Name (Last, First, Middle Initial)			
Mr. Samuel H. Hazleton, IV			Date of Receipt
Mailing Address 4220 Lakeshore Dri	ve		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R488584
Diamond Point	NY	12824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer	Occupation	n	Payroll Deduction
Name of Employer Self-employed	Insurance		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		420.00	
Carlot (opeonly)	0 0		1
SUBTOTAL of Receipts This Page (optional)		109.70
ODDIVIAL OF NecelPIS THIS Page (optional)		
TOTAL This Period (last page this line numl	oer only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 65 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δ	ay information conied from such Reports and State	mente may	y not be sold or used by any perso	
or	ny information copied from such Reports and State for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and Fittee	nancial Ad	dvisors Political Action Com	mit-
A.				Date of Receipt
	Mailing Address 20704 Meadow Ridge Dr			10 10 2007
	City	State	Zip Code	Transaction ID: R488495
	Springfield	NE	68059-7086	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	2080.00	
В.	Full Name (Last, First, Middle Initial) Sharon G. Heierman, CAE			Date of Receipt
υ.	Mailing Address 2990 Kemp Rd			M M / D D / Y Y Y Y
				10 10 2007
	City	State	Zip Code	Transaction ID: R487029
	<u>Havana</u>	<u>FL</u>	32333	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	- Toderal political committee.			Payroll Deduction
	Name of Employer Self-employed	Occupation		Payroli Deduction
	Receipt For:	Insurance	e Agent • Year-to-Date ▼	
	Primary General	Aggregate	r rear-to-Date V	1
	Other (specify) ▼		420.00	
_				
C.	Full Name (Last, First, Middle Initial) Mr. Steven B. Heinz			Date of Receipt
	Mailing Address 1341 E 600 N			M M / D D / Y Y Y Y
	City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R488563
	Orem	UT	84097	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer	Occupation	1	Payroll Deduction
	Self-employed	Insurance		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼		333.33	1
s	UBTOTAL of Receipts This Page (optional)			300.00
			·	
I T	OTAL This Period (last page this line number only	v)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee			
Α.	Full Name (Last, First, Middle Initial) Mr. Dennis L. Helgeson, CLU,ChFC,L Mailing Address 2601 Bel Air Drive City Minot FEC ID number of contributing federal political committee.	State ND	Zip Code 58703-1749	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Self-employed Receipt For: Primary General Other (specify)	Occupation Insurance Aggregate		
3.	Full Name (Last, First, Middle Initial) Mr. Marcus T. Henderson, Sr.,LUTCF Mailing Address 109 Barrington Court Ea City	st State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Franklin FEC ID number of contributing federal political committee.	TN	37067	Amount of Each Receipt this Period 42.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
D .	Full Name (Last, First, Middle Initial) Mr. Michael C. Herring Mailing Address 9550 N 150th Ct			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Waverly FEC ID number of contributing federal political committee.	State NE	Zip Code 68462-1569	Transaction ID: R488344 Amount of Each Receipt this Period 22.50
	Name of Employer Self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
SI	UBTOTAL of Receipts This Page (optional)			89.70
T	OTAL This Period (last page this line number on	ıly)	_	

	CHEDULE A (FEC Form 3X)	Use separate sched		
	EMIZED RECEIPTS	Detailed Summary F	Page X 11a 11b 11c 12 12 15 16	17
Ar or	ly information copied from such Reports and Statement for commercial purposes, other than using the name ar	s may not be sold or used by d address of any political cor	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.	
\setminus	NAME OF COMMITTEE (In Full) National Association of Insurance and Financitee	al Advisors Political Acti	tion Commit-	
Α.	Full Name (Last, First, Middle Initial) Mr. Ronald G. Hester, CLU, ChFC Mailing Address 261 New River Heights Rd.		Date of Receipt	
	City Sta Boone NC	•	Transaction ID: R490063 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		46.75	
	Self-employéd Insu	pation rance Agent	Payroll Deduction	
	Receipt For: Primary General Other (specify)	egate Year-to-Date ▼	67.50	
В.	Full Name (Last, First, Middle Initial) Mr. Richard L. Hill, CLU, ChFC, Mailing Address 2611 Alvo Road		Date of Receipt	
	City Sta	te Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R490381	
	Seward NE	68434	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		42.00	
	Self-employed Insu	pation rance Agent	Payroll Deduction	
	Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼	20.00	
C.	Full Name (Last, First, Middle Initial) Mr. Michael J. Hiller, ChFC		Date of Receipt	
	Mailing Address W267 S7930 Stony Pt. Ct.		10 10 7 2007	
	City Sta Mukwonago WI	e Zip Code 53149-9687	Transaction ID: R489146 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		25.20	
	Self-employed 1	pation rance Agent	Payroll Deduction	
	Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼	252.00	
s	UBTOTAL of Receipts This Page (optional)		113.95	
Н	OTAL This Period (last page this line number only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	Inot be sold or used by any persordress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F			
A .	Full Name (Last, First, Middle Initial) Mr. Jeff L. Holland, CLU, ChFC Mailing Address 200 Matthew Drive City Paducah FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State KY C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R490216 Amount of Each Receipt this Period 30.00 Payroll Deduction
	Primary General Other (specify) ▼	Aggregate	300.00	
3.	Full Name (Last, First, Middle Initial) Mr. Robert J. Hollander, LUTCF Mailing Address 904 Rockhurst Dr. City Lincoln FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NE C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) Mr. Richard L. Hoover, LUTCF, RIA Mailing Address 2920 S. Jones Blvd., #1 City Las Vegas FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NV C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S	UBTOTAL of Receipts This Page (optional)			214.50
т	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 69 / 173 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Ms. Cherylyn L. Houpo Mailing Address 659 Akakuu St			Date of Receipt
	City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R486785
	Wailuku	HI	96793	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Darrel V. Hovde			Date of Receipt
	Mailing Address PO Box 1806		10 10 / 2007	
	City	State	Zip Code	Transaction ID: R488332
	Minot	ND	58702-1806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.60 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance	e Agent	rayion Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 301.20	
— D.	Full Name (Last, First, Middle Initial) Ms. April L. Howard			Date of Receipt
	Mailing Address 3386 Williamsburg			10 10 2007
	City Boise	State ID	Zip Code 83706-5320	Transaction ID: R489548 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.00	
S	UBTOTAL of Receipts This Page (optional)			115.60
T	OTAL This Period (last page this line number or	ıly)		

SCHE	DULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 70 / 173			
	ZED RECEIPTS		or each category of the	(check only one)] 440 🖂 40			
—			Detailed Summary Page	X 11a 11b 1	11c 12 15 16 17			
Any infor	mation copied from such Reports and Sta	tements may	γ not be sold or used by any perso	n for the purpose of solicit	ting contributions			
or for cor	mmercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from s	such committee.			
\	E OF COMMITTEE (In Full)	inoncial A	duinara Dalitias! Astissa Osses	mi+				
/ Natio	onal Association of Insurance and F	папсіаі А	uvisois poillicai action comi	IIIL-				
_	lame (Last, First, Middle Initial)							
	ebert Andre Howes, Jr.,CLU ng Address 10 South Jefferson St. S)+o 050		Date of Receipt	/ Y Y Y Y			
iviaiiii	ig Address To South Jeherson St. S	ste. 650		10 10	2007			
City		State	Zip Code	Transaction ID: R4	89048			
<u>Roar</u>	noke	VA	24011	Amount of Each Red	ceipt this Period			
	ID number of contributing al political committee.	С			21.00			
Name	e of Employer	Occupation	<u> </u>	Payroll Deduction				
Self-	employed	Insurance						
Recei	ipt For:	Aggregate	e Year-to-Date ▼					
	Primary		210.00					
	Other (specify)		0 0 0 0 0 0 0					
	Jame (Last, First, Middle Initial) //illiam A. Hume, LUTCF			Date of Receipt				
	ng Address 1075 Woodfield Lane			M M / D D				
<u> </u>			10 10	2007				
City	rtyville	State II	Zip Code 60048	Transaction ID: R4				
	ID number of contributing	15	00040	Amount of Each Red				
	al political committee.	C			42.50			
Name	of Employer	Occupation	า	Payroll Deduction				
Self-e	e of Employer employed	Insurance						
Recei	ipt For:		Year-to-Date ▼					
	Primary General		425.00					
	Other (specify) ▼	0 0						
	Name (Last, First, Middle Initial)			Data of Daggint				
	lbert T. Hurst, Jr.,FICF,C ng Address 1422 Spring Street			Date of Receipt	/ Y Y Y Y			
	1422 Opining Otroct			10 10	2007			
City	D. J	State	Zip Code	Transaction ID: R4				
	e Rock	AR	72202-4856	Amount of Each Red	ceipt this Period			
	ID number of contributing all political committee.	C			25.20			
	·	10		Payroll Deduction				
Self-e	e of Employer employed	Occupation Insurance		'				
Recei	ipt For:		Year-to-Date ▼					
	Primary General		252.00					
	Other (specify) ▼	0 0	232.00					
SUBTO	TAL of Receipts This Page (optional)		······		88.70			
TOTAL	This Period (last page this line number or	าly)	>					

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 71 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
TIEMIZED RESEIT 15			Detailed Summary Page	X 11a 11b 11c 12
_			.1. 11. 11	13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and I tee	Financial Ad	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Hollis O. Inglett, Jr.,LUTCF			Date of Receipt
	Mailing Address 31 Cone Rd			10 10 2007
	City	State	Zip Code	Transaction ID: R490331
	Ormond Beach	<u>FL</u>	32174-7903	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		420.00	1
	Other (specify) 🔻	0 0	420.00	
В.	Full Name (Last, First, Middle Initial) Mr. William V. Irons, CLU, LUTCF			Date of Receipt
	Mailing Address 150 Prospect Rd			10 10 2007
	City	State	Zip Code	Transaction ID: R490057
	Wakefield	RI	02879-7044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.20
	federal political committee.	Occupation		
	federal political committee. Name of Employer Self-employed	Occupation Insurance	e Agent	25.20
	federal political committee. Name of Employer Self-employed Receipt For:	Occupation Insurance		25.20
	federal political committee. Name of Employer Self-employed	Occupation Insurance	e Agent	25.20
	Name of Employer Self-employed Receipt For: Primary General	Occupation Insurance	e Agent Year-to-Date ▼	25.20
c.	Receipt For: Primary Other (specify)	Occupation Insurance	e Agent Year-to-Date ▼	Payroll Deduction
C.	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Charles E. Jackson, Jr.	Occupation Insurance	e Agent Year-to-Date ▼	Payroll Deduction Date of Receipt
c.	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Charles E. Jackson, Jr. Mailing Address 53 Jordan Lane	Occupation Insurance Aggregate	e Agent Year-to-Date ▼ 252.00	Payroll Deduction Date of Receipt 10 10 2007
 C.	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Charles E. Jackson, Jr. Mailing Address 53 Jordan Lane City	Occupation Insurance Aggregate	e Agent Year-to-Date ▼ 252.00 Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Charles E. Jackson, Jr. Mailing Address 53 Jordan Lane City Mobile FEC ID number of contributing	Occupation Insurance Aggregate State AL C	P Agent Year-to-Date ▼ 252.00 Zip Code 36608-2624	Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c .	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Charles E. Jackson, Jr. Mailing Address 53 Jordan Lane City Mobile FEC ID number of contributing federal political committee. Name of Employer	Occupation Insurance Aggregate State AL C Occupation Insurance	P Agent Year-to-Date ▼ 252.00 Zip Code 36608-2624	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Charles E. Jackson, Jr. Mailing Address 53 Jordan Lane City Mobile FEC ID number of contributing federal political committee. Name of Employer Self-employed	Occupation Insurance Aggregate State AL C Occupation Insurance	e Agent Year-to-Date ▼ 252.00 Zip Code 36608-2624	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Charles E. Jackson, Jr. Mailing Address 53 Jordan Lane City Mobile FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	Occupation Insurance Aggregate State AL C Occupation Insurance	e Agent Year-to-Date ▼ 252.00 Zip Code 36608-2624 Agent Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Charles E. Jackson, Jr. Mailing Address 53 Jordan Lane City Mobile FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State AL C Occupatior Insurance Aggregate Atala AL C Aggregate Aggregate	Zip Code 36608-2624 Agent Year-to-Date ▼ 252.00 Zip Code 36608-2624 201.50	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 173 (check only one) X
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. Greg W. Jacobs Mailing Address 1350 Grand Summitt Dri City	ve #116	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Reno	NV	89523	Transaction ID: R487073 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	25.20
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Mr. Richard B. Jacobs, LUTCF Mailing Address 5396 Painted Sunrise Dr			Date of Receipt
	City	State	Zip Code	Transaction ID: R488500
	Las Vegas	NV	89149-6443	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.20
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Samuel B. James, LUTCF			Date of Receipt
	Mailing Address 6410 Shady Lane			10 10 / 2007
	City	State	Zip Code	Transaction ID: R488948
	Fayetteville FEC ID number of contributing federal political committee.	NC C	28304-3931	Amount of Each Receipt this Period 19.25
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	
s	UBTOTAL of Receipts This Page (optional)			69.65
т.	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 173 (check only one) X				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and F	Financial A	dvisors Political Action Com	mit-				
Α.	Full Name (Last, First, Middle Initial) Mr. Earl H. Jarnigan, LUTCF, CLU Mailing Address 631 Morrell Springs Rd. City Newport FEC ID number of contributing federal political committee. Name of Employer Self-employed	State TN C Occupation Insurance		Date of Receipt M M				
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 312.50					
3.	Full Name (Last, First, Middle Initial) Mr. Donald C. Jayne, CLU, ChFC Mailing Address 20402 Tulsa Street City Chatsworth FEC ID number of contributing federal political committee.	State CA	Zip Code 91311-1723	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R489990 Amount of Each Receipt this Period 25.00				
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction				
	Full Name (Last, First, Middle Initial) Mr. Jerry E. Jensen, LUTCF Mailing Address 190 So. 800 W. City Blackfoot FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State ID C Occupation Insurance Aggregate		Date of Receipt M M J D D Z 2007 Transaction ID: R488763 Amount of Each Receipt this Period 50.40 Payroll Deduction				
s	SUBTOTAL of Receipts This Page (optional)							
T	OTAL This Period (last page this line number o	nlv)						

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 74 / 173
ıт	EMIZED RECEIPTS	or each category of the	(check only one)
••	LIMIZED REGEN 10	Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and Statements r	may not be sold or used by any perso	
or	for commercial purposes, other than using the name and	address of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)		
	National Association of Insurance and Financial tee	Advisors Political Action Com	mit-
^	Full Name (Last, First, Middle Initial)		Data of Descript
Α.	Mr. Randall H. Jensen Mailing Address 124 W 46th St., #201		Date of Receipt
	Walling 7,667655 124 VV 46[11 St., #201		10 10 2007
	City State	Zip Code	Transaction ID: R489603
	<u>Kearney</u> NE	68847	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		21.00
	Name of Employer Occupa	tion	Payroll Deduction
	Self-employed '	nce Agent	
	Receipt For: Aggreg	ate Year-to-Date ▼	
	Primary General	210.00	1
	Other (specify) ▼	210.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. John C. Johns, LUTCF		Date of Receipt
	Mailing Address 5141 Lilly Rd.		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Transaction ID: R489532
	<u>Hazlehurst</u> MS	39083	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		42.50
	Name of Employer Occupa	tion	Payroll Deduction
	· · · · · · · · · · · · · · · · · · ·	nce Agent	
		ate Year-to-Date ▼	
	Primary General Other (specify) ▼	325.00	
	Carist (openity) V	0 0 0 0 0 0 0 0	
C.	Full Name (Last, First, Middle Initial) Mr. Johnny Jon Johnson, LUTCF		Date of Receipt
-	Mailing Address 3770 N Frandon Avenue		M M / D D / Y Y Y Y
			10 10 2007
	City State Meridian ID	Zip Code	Transaction ID: R490347
		83646	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		27.00
	Name of Employer Occupa Self-employed Inquire		Payroll Deduction
	IIISUIA	nce Agent ate Year-to-Date ▼	_
	Receipt For: Primary General Aggreg	ale rear-10-Dale V	1
	Other (specify)	270.00	
_		1	
	UBTOTAL of Receipts This Page (optional)		90.50
\vdash	- age (optional)		
т	OTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Insurance attee	and Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. Larry G. Johnson, LUTCF, CSA Mailing Address 44466 Albert City Plymouth FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Melville D.K. Jones	State MI C Occupatio Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 1391 City Puunene FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State HI C Occupation Insurance Aggregate		Transaction ID: R488296 Amount of Each Receipt this Period 25.00 Payroll Deduction
Full Name (Last, First, Middle Initial) Mr. Terry M. Kaltenbach, CLU, ChFC Mailing Address 1358 Ahlrich Ave City Encintas FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State CA C Occupatio Insuranc Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	(lı)	177.50
TOTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
Ar or	ly information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may ne and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee	ancial Ad	dvisors Political Action Com	mit-			
<u>/</u>	Full Name (Last, First, Middle Initial) Mr. Bruce H. Kantor, CLU, LUTCF Mailing Address 2901 Cross Country Rd City State Zip Code Charlotte NC 28270-0600 FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) COccupation Insurance Agent Aggregate Year-to-Date 231.00 Full Name (Last, First, Middle Initial) Mr. Randall D. Kaufmann Mailing Address 356 Equus Drive			Date of Receipt M			
	Name of Employer Self-employed II	PA C Description nsurance	17011-8357	Amount of Each Receipt this Period 22.50 Payroll Deduction			
D.	Name of Employer Self-employed	State MT C Occupation nsurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R488769 Amount of Each Receipt this Period 27.00 Payroll Deduction			
s	SUBTOTAL of Receipts This Page (optional)						
Т	OTAL This Period (last page this line number only))	_				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17			
Ar or	y information copied from such Reports and Statemen for commercial purposes, other than using the name a	nts may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Finance	cial Ad	dvisors Political Action Com	nit-			
Α.	Full Name (Last, First, Middle Initial) Mr. John B. Kearns, LUTCF Mailing Address 1802 First Ave City State Zip Code Scottsbluff NE 69361 FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Aggregate Year-to-Date ▼			Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Primary General Other (specify) ▼		425.00				
3.	Louisville KY FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occurrence Insurance Self-employed	upation	Zip Code 40222-5042 Agent Year-to-Date ▼ 255.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R488294 Amount of Each Receipt this Period 30.00 Payroll Deduction			
 -	Full Name (Last, First, Middle Initial) Mr. F. Nicholas Kelley, CLU Mailing Address 1323 S. 174 St. City Sta Omaha NE FEC ID number of contributing federal political committee. Name of Employer Self-employed Occurrent	upation	Zip Code 68130 De Agent Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
s	SUBTOTAL of Receipts This Page (optional)						
T	OTAL This Period (last page this line number only)		>				

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 78 / 173				
ITEMIZED RECEIPTS			or each category of the	(check only one)				
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12				
_					17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	or not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)		_					
$ \rangle$	National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-				
	tee	manorar 7 k	aviour i cittical riction com					
_	Full Name (Last, First, Middle Initial)							
A.	Mr. Michael L. Kerley, JD			Date of Receipt				
	Mailing Address 2901 Telestar Court			10 25 Y Y Y Y Y Y				
	City	State	Zip Code					
	Falls Church	VA	22042	Transaction ID: R491524				
		VA	22042	Amount of Each Receipt this Period	7			
	FEC ID number of contributing federal political committee.	C		52.25	ı			
				Check	1			
	Name of Employer Self-employed	Occupation	1	Crieck				
		Insurance						
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		992.75					
	Other (specify)	0 0	0 0 0 0 0 0 0					
_	Full Name (Last, First, Middle Initial)			+	_			
В.				Date of Receipt				
	Mailing Address 2901 Telestar Court			M M / D D / Y Y Y				
				10 31 2007				
	City	State	Zip Code	Transaction ID: R491730				
	Falls Church	VA	22042	Amount of Each Receipt this Period				
	FEC ID number of contributing	С		52.25	1			
	federal political committee.				1			
	Name of Employer Self-employed	Occupation	1	Check				
	Self-employed	Insurance	e Agent					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		992.75					
	Other (specify) ▼		332.73					
	Full Name (Last, First, Middle Initial)			- 				
C.	Mr. Roy W. Kern, LUTCF, CLTC			Date of Receipt				
-	Mailing Address 3775 West Randall Road	d		M M / D D / Y Y Y Y				
		<u>. </u>		10 10 2007				
	City	State	Zip Code	Transaction ID: R490206				
	Springfield	MO	65810	Amount of Each Receipt this Period				
	FEC ID number of contributing	С		60.00	1			
	federal political committee.			00.00				
	Name of Employer	Occupation	1	Payroll Deduction				
	Self-employed	Insurance						
			Year-to-Date ▼					
				1				
	Other (specify) ▼		660.00					
_								
S	UBTOTAL of Receipts This Page (optional)		······	164.50	1			
					1			
T	OTAL This Period (last page this line number or	nly)	>		4			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 173 (check only one) X 11a 11b 11c 12
Ang	y information copied from such Reports and Sta or commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Itee			
۹.	Full Name (Last, First, Middle Initial) Mr. Marvin R. Keys, LUTCF Mailing Address 8785 Inverness Place City Tuscaloosa	State AL	Zip Code	Date of Receipt 10 10 2007 Transaction ID: R490308
	FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	Occupation Insurance		Amount of Each Receipt this Period 22.50 Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Mr. Thomas K. Kilton Mailing Address 1933 E River Pkwy City Minneapolis FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary Other (specify)	State C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R488384 Amount of Each Receipt this Period 21.00 Payroll Deduction
C.	Full Name (Last, First, Middle Initial) Mr. Thomas K. Kilton Mailing Address 1933 E River Pkwy City Minneapolis FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State C Occupation Insurance Aggregate		Date of Receipt M M M / 26 / 2007 Transaction ID: R491626 Amount of Each Receipt this Period 25.00 Check
SI	JBTOTAL of Receipts This Page (optional)		_	68.50
TC	OTAL This Period (last page this line number o	nly))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 80 / 173				
ITEMIZED RECEIPTS			or each category of the	(check only one)				
••	LIMIZED RESERVED		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar	ny information copied from such Reports and Statements	s may	not be sold or used by any perso	n for the purpose of soliciting contributions				
or	for commercial purposes, other than using the name and	ia aac	aress of any political committee to	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
\angle	National Association of Insurance and Financitee	iai A	dvisors Political Action Com	mit-				
Α.	Full Name (Last, First, Middle Initial) Mr. Richard D. Kimmel			Date of Receipt				
	Mailing Address 6525 Bellaire Drive S			M M / D D / Y Y Y Y Y 1 1 0 1 0 2 0 0 7				
	City Stat	ıto.	Zip Code	Transaction ID: R488484				
	Ft Worth TX		76132-1138	Amount of Each Receipt this Period				
			70102-1100	Amount of Each Neceipt this Period				
	FEC ID number of contributing federal political committee.			50.00				
	Name of Employer Occup	pation	1	Payroll Deduction				
	Self-employed Insur	rance	e Agent					
	Receipt For: Aggre	regate	Year-to-Date ▼					
	Primary General		428.00					
	Other (specify) ▼	0	420.00					
— В.	Full Name (Last, First, Middle Initial) Mr. Lawrence L. Kitts, CLU,ChFC,R			Date of Receipt				
	Mailing Address 10842 Mount CurveRd			M M / D D / Y Y Y Y				
				10 10 2007				
	City Stat	ite	Zip Code	Transaction ID: R489992				
	Eden Prairie MN	1	55347-2908	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			21.00				
				Payroll Deduction				
	Name of Employer Occup Self-employed			i ayron Boddonon				
	Insur		e Agent • Year-to-Date ▼	_				
	Receipt For: Aggre	regate	rear-to-date V					
	Other (specify) ▼		210.00					
		0	0 0 0 0 0 0 0					
C.	Full Name (Last, First, Middle Initial) Mr. David G. Klemisch, LUTCF			Date of Receipt				
	Mailing Address 2801 26th Ave SW			M M / D D / Y Y Y Y				
				10 10 2007				
	City Stat		Zip Code	Transaction ID: R488994				
	<u>Fargo</u> ND)	58103	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee			51.00				
	federal political committee.	-						
	Name of Employer Occup	pation	า	Payroll Deduction				
			e Agent					
	Receipt For: Aggre	regate	Year-to-Date ▼					
	Primary General		510.00					
	Other (specify) ▼	0	310.00					
	SUPTOTAL of Descripto This Days (antional)							
S	UBTOTAL of Receipts This Page (optional)		·····	122.00				
т	TOTAL This Period (last page this line number only)							
	, ,							

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 81 / 1/3			
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12			
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17			
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)						
National Association of Insurance and I tee	Financial A	dvisors Political Action Com	mit-			
Full Name (Last, First, Middle Initial) Mr. Casey C. Knake, CLU, ChFC			Date of Receipt			
Mailing Address 2902 Mach I Dr.	Obsta	7's Oads	10 10 2007			
City Norfolk	State NE	Zip Code 68701-3238	Transaction ID: R488760 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	00701 0250	42.00			
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00				
Full Name (Last, First, Middle Initial) Mr. Kenneth E. Knox, CLU, ChFC			Date of Receipt			
Mailing Address Unit 9, 10 East St			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State RI	Zip Code	Transaction ID: R489895			
Providence	NI NI	02906-3069	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.40 Payroll Deduction			
Name of Employer Self-employed	Occupatio Insuranc		rayion beduction			
Receipt For:	Aggregate	e Year-to-Date ▼				
Primary General Other (specify) ▼		504.00				
Full Name (Last, First, Middle Initial) Mr.James C. Koburger,LUTCF			Date of Receipt			
Mailing Address 3134 Brandywine Drive			10 11 7 2007			
City	State	Zip Code	Transaction ID: R490782			
Tallahassee	FL	32308	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		500.00 Check			
Name of Employer Self-employed	Occupatio Insuranc	e Agent	Officer			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00				
SUBTOTAL of Receipts This Page (optional)						
TOTAL This Period (last page this line number of	nly)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBI	ER: PAGE 82/173			
ITEMIZED RECEIPTS			or each category of the	(check only one)				
TI LIMIZED TILOLII 13			Detailed Summary Page	X 11a 11k	\mapsto \mapsto $-$			
_				13 14	15 16 17			
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of s solicit contributions f	soliciting contributions rom such committee			
<u></u>	NAME OF COMMITTEE (In Full)							
$ \rangle$	National Association of Insurance and I	inancial A	dvisors Political Action Com	mit-				
<u></u>	Full Name (Last, First, Middle Initial)							
A.	Mr. Fredric Kofke, LUTCF			Date of Receip	t			
	Mailing Address 3009 State Hill Rd				D / Y Y Y Y			
					10 2007			
	City	State	Zip Code	Transaction ID				
	Wyomissing	PA	19610	Amount of Eac	h Receipt this Period			
	FEC ID number of contributing federal political committee.				21.00			
	Name of Employer	Occupation	า	Payroll Deduc	tion			
	Self-employed	Insurance						
	Receipt For:		Year-to-Date ▼					
	Primary General			1				
	Other (specify) ▼		210.00					
_	Full Name (Last, First, Middle Initial)			5 . (5				
В.				Date of Receip				
	Mailing Address 4632 Mountain Park Rd	•			10 2007			
	City	State	Zip Code	Transaction ID: R490024				
	Pocatello	ID	83202-1702		h Receipt this Period			
	FEC ID number of contributing		1 1 1 1 1 1	7 tillodilit or Edo	· · · · · · · · · · · · · · · · · · ·			
	federal political committee.	C			126.00			
	V (5.1	10		Payroll Deduc	tion			
	Name of Employer Self-employed	Occupation						
	Receipt For:	Insurance	e Agent e Year-to-Date ▼					
	Primary General	Aggregate	FIGAL-10-Date V	1				
	Other (specify)		1590.00					
				1				
	Full Name (Last, First, Middle Initial)							
C.	Mr. David M. Koll, LUTCF			Date of Receip	t			
	Mailing Address 1612 S. 152nd Street				10 2007			
	City	State	Zip Code	Transaction ID				
	Omaha	NE	68144-5121		h Receipt this Period			
		C		7 tillodrit of Edo	 			
	FEC ID number of contributing federal political committee.				105.00			
				Payroll Deduc	tion			
Self-employed Insura		Occupation		,				
			e Agent e Year-to-Date ▼	\dashv				
Receipt For: Primary General Aggrega			FIGAL-10-Date V	1				
	Other (specify)	1050.00						
		1						
s	UBTOTAL of Receipts This Page (optional)				252.00			
	·		•	• • •				
т	OTAL This Period (last page this line number of	nly)	>					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 83 / 173 (check only one)
-			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	nit-
<u>΄</u> Α.	Full Name (Last, First, Middle Initial) Mr. Richard A. Koob, CLU, ChFC,			Date of Receipt
	Mailing Address 301 Frederick Street	Ctoto	7:n Code	10 10 2007
	City Waukesha	State WI	Zip Code 53186-8116	Transaction ID: R489681 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.40
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 504.00	
3.	Full Name (Last, First, Middle Initial) Mr. David T. Koppa, CLU, LUTCF			Date of Receipt
	Mailing Address 1105 Via Bolzano		7: 0 :	10 10 2007
	City Santa Barbara	State CA	Zip Code 93111-1053	Transaction ID: R489426 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33111-1033	42.50
	Name of Employer Self-employed	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 425.00	
 Э.	Full Name (Last, First, Middle Initial) Mr. Ronald F. Kramer, LUTCF			Date of Receipt
	Mailing Address P. O. Box 26			10 10 7 2007
	City Pierce	State NE	Zip Code 68767-0026	Transaction ID: R489890 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	001010000	21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 210.00	
S	UBTOTAL of Receipts This Page (optional)			113.90
T	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 84 / 173 (check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Insurance and F			
/ tee Full Name (Last, First, Middle Initial)			
Mr. Ben Kronish, CLU, ChFC,			Date of Receipt
Mailing Address 205 W 89th St #2H			10 10 2007
City	State	Zip Code	Transaction ID: R489836
New York	NY	10024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
Primary General Other (specify)	riggrogate	250.00	
	0 0	0 0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) Mr. Jon P. Kubler, LUTCF			Date of Receipt
Mailing Address 1620 N. 127th St			10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R488725
<u>Omaha</u>	NE	68154-3637	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		22.50
Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
Receipt For:		e Year-to-Date ▼	-
Primary General Other (specify) ▼		225.00	
Full Name (Last, First, Middle Initial) Mr. Larry M. Lambert, CLU, CFP,			Date of Receipt
Mailing Address 6915 Steeplechase Cir			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City	State	Zip Code	Transaction ID: R490515
Huntington Beach	CA	92648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer Self-employed	Occupation		Credit Card
Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
Primary General Other (specify) ▼	Aggregate	1250.00	
SUBTOTAL of Receipts This Page (optional)			1297.50
TOTAL This Period (last page this line number or	nlv)	<u> </u>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 85/1/3
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. Gary M. Lane, CLU			Date of Receipt
Mailing Address 925 Highland Terrance	NE		10 10 / Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R490453
Atlanta	GA	30306	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		22.50
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		225.00	
Full Name (Last, First, Middle Initial) 3. Mr. Thomas R. Laster, RHU			Date of Receipt
Mailing Address 1713 Elmhurst Ave			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R490327
Nichols Hills	OK	73120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.40
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	504.00	
Full Name (Last, First, Middle Initial) C. Ms. Monica J. Lawfield, CMFC			Date of Receipt
Mailing Address 6851 Caballero Dr.			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R487076
<u>Jacksonville</u>	<u>FL</u>	32217	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		21.00
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	210.00	
SUBTOTAL of Receipts This Page (optional)			93.90
TOTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 86 / 173 (check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	nit-
΄ Α.	Full Name (Last, First, Middle Initial) Mr. Daniel L. Lawrence			Date of Receipt
	Mailing Address 5553 Peters Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488758
	West Bend	WI	53095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		51.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		510.00	
3.	Full Name (Last, First, Middle Initial) Mr. Kevin J. Leahy, LUTCF			Date of Receipt
	Mailing Address 1300 Rock Chapel Road			10 10 / 2007
	City	State	Zip Code	Transaction ID: R490468
	Herndon	VA	20170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	210.00	
	Full Name (Last, First, Middle Initial) Ms. Elizabeth J. Lee			Date of Receipt
	Mailing Address 19431 Rue de Valore 22G			10 10 / 2007
	City	State	Zip Code	Transaction ID: R486884
	Foothill Ranch	CA	92610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
Self-employed 1		Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	
S	UBTOTAL of Receipts This Page (optional)			87.00
T	OTAL This Period (last page this line number or	nly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 173 (check only one) X
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. Leslie W. Lee, CLU, ChFC Mailing Address 7522 E Hampstead Ct.			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490394
	Middleton	WI	53562	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.20
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	
3.	Full Name (Last, First, Middle Initial) Mr. Lanny D. Levin, CLU, ChFC			Date of Receipt
	Mailing Address 313 Laurel	10 10 2007		
	City	State	Zip Code	Transaction ID: R490081
	Highland Park	<u>IL</u>	60035-2619	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		1 dylon Boddonon
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		420.00	
D.	Full Name (Last, First, Middle Initial) Mr. T. Leslie Littleton, LUTCF, CLU			Date of Receipt
	Mailing Address 1025 E. Austin			10 10 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490397
	Nacogdoches	TX	75965-2964	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		47.50 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		rayion Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 440.00	
s	UBTOTAL of Receipts This Page (optional)			114.70
т.	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBE	R: PAGE 88 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)	
TI EMIZED RESER TO		Detailed Summary Page	X 11a 11b	\vdash	
_				13 14	15 16 17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	on for the purpose of s solicit contributions fr	oliciting contributions om such committee.		
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,		
$ \rangle$	National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-	
<u>/</u>	Full Name (Last, First, Middle Initial)				
A.	Mr. Akihiro F. Liu			Date of Receipt	
	Mailing Address 14314 Burbank Blvd, #2	214			D / Y Y Y Y
	011	01-1-	7's Osda		10 2007
	City	State	Zip Code	Transaction ID:	
	Van Nuys	CA	91401	Amount of Each	Receipt this Period
	FEC ID number of contributing federal political committee.	C			21.00
	Name of Employer	Occupation	1	Payroll Deduct	ion
	Self-employed	Insurance	e Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		210.00	1	
	Other (specify)		210.00		
В.	Full Name (Last, First, Middle Initial) Mr. Lawrence E. Lounds			Date of Receipt	
٥.	Mailing Address 2477 Valley Oaks Circle	<u> </u>			D / Y Y Y Y
	Walling Addition 2411 Valley Oaks Office	-			10 2007
	City	State	Zip Code	Transaction ID:	: R490427
	Flint	MI	48532		n Receipt this Period
	FEC ID number of contributing				105.00
	federal political committee.	C			103.00
	Name of Employer	Occupation	<u> </u>	Payroll Deduct	ion
	Name of Employer Self-employed	Insurance			
	Receipt For:		e Year-to-Date ▼		
	Primary General			1	
	Other (specify) ▼		1205.00		
C.	Full Name (Last, First, Middle Initial) Mr. Archie F. Lowe, CLU			Date of Receipt	
C.	Mailing Address 38 Old Ivy Road, Suite	200			D / Y Y Y Y
	Thaining Address 30 Old Tvy Hoad, Suite	200			10 2007
	City	State	Zip Code	Transaction ID:	: R488835
	Atlanta	GA	30342	Amount of Each	Receipt this Period
	FEC ID number of contributing	C			21.00
	federal political committee.				21.00
	Name of Employer		 n	Payroll Deduct	ion
Self-employed Insu		Occupation			
		-	e Year-to-Date ▼		
Primary General Other (specify) ▼			0.10,00	1	
			210.00		
_					
					147.00
S	UBTOTAL of Receipts This Page (optional)		······		147.00
T	OTAL This Period (last page this line number of	only)	>		

ITEMIZ	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 173 (check only one) X
Any inform or for com	nation copied from such Reports and Sta Imercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
1	OF COMMITTEE (In Full) nal Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
Full Na Mr. R. Mailing City Erie FEC II federa Name Self-ei Receip Full Na Mrs. P.	Ame (Last, First, Middle Initial) Art Lubomski, CLU D Address 4137 Beech Ave D number of contributing I political committee. of Employer mployed ot For: Primary General Other (specify) Tame (Last, First, Middle Initial) atricia S. Lucas, CLU, CLTC, L D Address 8375 Starlight Lane	State PA C Occupation Insurance Aggregate		Date of Receipt M M J D D J 2007 Transaction ID: R490017 Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D J J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Boon FEC II federa Name Self-el	es Mill D number of contributing I political committee. of Employer mployed	State VA C Occupation Insurance Aggregate		Transaction ID: R489192 Amount of Each Receipt this Period 42.00 Payroll Deduction
City Beave FEC II federa Name Self-ei Receip	O number of contributing I political committee. of Employer mployed	State OR C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R490151 Amount of Each Receipt this Period 37.50 Payroll Deduction
SUBTOT	AL of Receipts This Page (optional)			100.50
TOTAL	This Period (last page this line number or	nlv)		

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMB	BER: PAGE 90 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)	
	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11	
_				13 14	
An or	y information copied from such Reports and State for commercial purposes, other than using the nan	ments may ne and ado	not be sold or used by any perso Iress of any political committee to	n for the purpose of solicit contributions	soliciting contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		71		
\rangle	National Association of Insurance and Fin	nancial Ad	dvisors Political Action Com	nit-	
	Full Name (Last, First, Middle Initial)				
٩.	Mr. Robert T. MacDonald			Date of Receip	ot
	Mailing Address 1931 N 73rd St.				D / Y Y Y Y Y
	City.	Ctoto	7in Cada	10	10 2007
	City Wauwatosa	State WI	Zip Code 53213	Transaction II	
	•	VVI	33213	Amount of Eac	ch Receipt this Period
	FEC ID number of contributing federal political committee.	C			27.00
	Name of Employer	Occupation	1	Payroll Deduc	ction
	Self-employed	Insurance	e Agent		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		270.00		
	Other (specify) ▼		270.00		
~	Full Name (Last, First, Middle Initial) Mr. Glenford B. Malcolm, Sr.			Date of Receip	nt .
٠.	Mailing Address P. O. Box 822315			⊣	D / Y Y Y Y
	Willing Address F. O. Box 022313			10	10 2007
	City	State	Zip Code	Transaction II	c : R490440
	South Florida	FL	33082-2315	Amount of Eac	ch Receipt this Period
	FEC ID number of contributing	С			42.00
	federal political committee.				
	Name of Employer Self-employed	Occupation	1	Payroll Deduc	ction
	Self-employed 5	Insurance	e Agent		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		420.00		
	Other (specify)	0 0	720.00		
 Э.	Full Name (Last, First, Middle Initial) Mr. Joseph J. Maltese, CFP	_		Date of Receip	ot
	Mailing Address 4176 Arikakee Court			M M / D	
				10	10 2007
	City	State	Zip Code	Transaction II	
	Jacksonville	FL	32223	Amount of Eac	ch Receipt this Period
	FEC ID number of contributing federal political committee.	C			42.00
	Name of Employer	Occupation		Payroll Deduc	ction
Self-employéd I		Insurance			
			Year-to-Date ▼	1	
	Primary General	39 - 3 - 11			
	Other (specify) ▼	0 0	420.00		
					444.00
S	JBTOTAL of Receipts This Page (optional)		······		111.00
т	OTAL This Period (last page this line number only	·))		

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 91 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 17 13 14 15 16 17
An or f	y information copied from such Reports and State or commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		are or any point our committee to	
\rangle	National Association of Insurance and Fittee	nancial Ad	dvisors Political Action Com	nit-
	Full Name (Last, First, Middle Initial) Mr. Dale F. Mamele, CLU			Date of Receipt
	Mailing Address 111 Old Home Pl.			M M / D D / Y Y Y Y
	City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R489469
	<u>Columbia</u>	SC	29212-2051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer	Occupation	1	Payroll Deduction
	Self-employed Self-employed	Insurance	e Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Mr. Lawrence Mann, CLU, ChFC			Date of Receipt
	Mailing Address 356 S Westgate Avenue			10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490886
	Los Angeles	CA	90049-4208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self-employed	Occupation Insurance		Check
	Receipt For:		e Year-to-Date ▼	-
	Primary General	33 -3		
	Other (specify) ▼		250.00	
) .	Full Name (Last, First, Middle Initial) Mr. Donald L. Maricle, CLU, ChFC			Date of Receipt
	Mailing Address 42 Pine Tree Ln.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490755
	West Seneca	NY	14224-4145	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
Self-employed		Occupation Insurance		- Check
	Receipt For:		Year-to-Date ▼	1
	Primary General		500.00	
	Other (specify)	0 0	300.00	
SI	JBTOTAL of Receipts This Page (optional)			775.00
T	OTAL This Period (last page this line number onl	v)		
٠,		<i>」</i> ,		

S	CHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE	
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
•	· · · · · · · · · · · · · · · · · · ·			13 14 15 16 17
or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and F tee	inancial Ac	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Claude A. Marlowe, Jr., LUTCF			Date of Receipt
	Mailing Address 1101 Radcliffe Avenue			10 10 2007
	City	State	Zip Code	Transaction ID: R490267
	Kingsport	TN	37664-2025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		010.00	1
	Other (specify) ▼	0 0	210.00	
В.	Full Name (Last, First, Middle Initial) Mr. Leonard Martin, CSA			Date of Receipt
	Mailing Address 98 Tennyson Rd	10 10 2007		
	City	State	Zip Code	Transaction ID: R489375
	Warwick	RI	02888	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.40
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General	· · ·	504.00	1
	Other (specify)	0 0	504.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) Mr. Darren Scott Mason, CLU, ChFC			Date of Receipt
	Mailing Address 178 Shorecliff Rd			M M / D D / Y Y Y Y Y Y 1 Y 1 D D / 2007
	City	State	Zip Code	Transaction ID: R489885
	Corona Del Mar	CA	92625-2648	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.66
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		410.00	1
	Other (specify) ▼		416.60	
s	UBTOTAL of Receipts This Page (optional)			113.06
\vdash	OTAL This Period (last page this line number on			

S	CHEDULE A (FEC Form 3X)		l la a agravata a abadula(a)	FOR LINE NUMBER: PAGE 93 / 173		
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the		(check only one)		
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
An	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may	not be sold or used by any person	n for the purpose of soliciting contributions		
0.	NAME OF COMMITTEE (In Full)	arric aria auc	arcas of any political committee to	Solicit Contributions from Such Committee.		
	National Association of Insurance and F	inancial A	dvicare Political Action Com-	mit		
\angle	tee	IIIaiiCiai A	uvisors Folitical Action Colli			
A.	Full Name (Last, First, Middle Initial) Mr. Douglas B. Massey, CLU, ChFC,			Date of Receipt		
	Mailing Address 3115 Southwest Blvd.			M M / D D / Y Y Y Y Y Y 1 1 0 1 0 1 0 0 7		
	City	State	Zip Code			
	San Angelo	TX	76904-5772	Transaction ID: R490059		
	•	1/	70904-3772	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		42.50		
	Name of Employer	Occupation	 1	Payroll Deduction		
	Self-employed	Insurance				
	Receipt For:		Year-to-Date ▼			
	Primary General		000.50			
	Other (specify) ▼		268.50			
В.	Full Name (Last, First, Middle Initial) Mr. Curtis L. Matlin, CLU			Date of Receipt		
	Mailing Address 707 Skokie Blvd. #700			M M / D D / Y Y Y Y		
				10 10 2007		
	City State Zip Code			Transaction ID: R488699		
	Northbrook	IL	60062	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		21.00		
	federal political committee.			D. H.D. Luffer		
	Name of Employer Self-employed	Occupation		Payroll Deduction		
		Insurance				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Primary General Other (specify)	210.00				
	Carlos (opensy) 🔻	0 0	1 1 1 1 1 1 1			
<u> </u>	Full Name (Last, First, Middle Initial)			Data of Descipt		
J .	Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga			Date of Receipt		
				10 10 2007		
	City	State	Zip Code	Transaction ID: R490388		
	Saint Charles	MO	63303-1766	Amount of Each Receipt this Period		
	FEC ID number of contributing	C		50.40		
	federal political committee.					
	Name of Employer	Occupation		Payroll Deduction		
	Self-employed *	Insurance				
	Receipt For:		Year-to-Date ▼			
	Primary General Other (specify)		504.00			
	☐ Other (specify) ▼					
6	JBTOTAL of Receipts This Page (optional)			113.90		
\vdash						

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 94 / 173
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S	Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the	e name and add	aress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial)			
Mr. Michael V. May, CLU, ChFC, Mailing Address P O Box 910			Date of Receipt
Walling Address P O Box 910			10 10 2007
City	State	Zip Code	Transaction ID: R488711
Port Richey	FL	34673-0910	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
Primary General	Aggregate		1
Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) 3. Ms. Lisa McAree, CLU, LTCP			Date of Receipt
Mailing Address 300 Commercial St. #304			10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R490865
Boston	MA	02109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self-employed	Occupation		Credit Card
Receipt For:	Insurance	e Agent e Year-to-Date ▼	
Primary General	Aggregate		1
Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) C. Mr. Adam Cole McConathy	•		Date of Receipt
Mailing Address 607 Kendal Ridge			M M M / D D / Y Y Y Y
	01-1-	7:a Cada	10 10 2007
City <u>Monroe</u>	State LA	Zip Code 71201	Transaction ID: R486826 Amount of Each Receipt this Period
FEC ID number of contributing		1121	
federal political committee.	C		22.50
Name of Employer	Occupation	n	Payroll Deduction
Self-employed	Insurance		_
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
Other (specify) ▼		225.00	
SUBTOTAL of Receipts This Page (optional)			297.50
ago (optional)			
TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 95 / 173					
ITEMIZED RECEIPTS		or each category of the	(check only one)					
TI LIMIZED REGEN 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Any information applied from such Departs and State	omente mou	not be cold or used by any parce						
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ime and add	ress of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
National Association of Insurance and Fir	nancial Ad	lvisors Political Action Comr	nit-					
Full Name (Last, First, Middle Initial)								
Mr. James L. McConathy, Jr.			Date of Receipt					
Mailing Address 706 Trenton St., Apt. 6			10 10 2007					
City	State	Zip Code	Transaction ID: R488626					
West Monroe	LA	71291	Amount of Each Receipt this Period					
FEC ID number of contributing								
federal political committee.	С		50.00					
Name of Employer	Occupation		Payroll Deduction					
Self-employed	Insurance							
Receipt For:		Year-to-Date ▼	7					
Primary General		500.00						
Other (specify) ▼		500.00						
Full Name (Last, First, Middle Initial) 3. Mrs. Joyce G. McDonald, CLU			Date of Receipt					
Mailing Address 1330 Hagood Ave			M M / D D / Y Y Y Y					
			10 10 2007					
City	State	Zip Code	Transaction ID: R489316					
Columbia	SC	29205	Amount of Each Receipt this Period					
FEC ID number of contributing	С		21.00					
federal political committee.			Daywell Daylesting					
Name of Employer Self-employed	Occupation		Payroll Deduction					
	Insurance							
Receipt For: Primary General	Aggregate	Year-to-Date ▼						
Other (specify)	' '	210.00						
cancil (openity) 🔻	0 0							
Full Name (Last, First, Middle Initial)								
Mr. Paul J. McGoldrick, CLU, ChFC,			Date of Receipt					
Mailing Address P. O. Box 439 106 Main St			10 22 2007					
City	State	Zip Code	Transaction ID: R491308					
Littleton	NH	03561-0439	Amount of Each Receipt this Period					
FEC ID number of contributing								
federal political committee.	C		100.00					
Name of Employer	Occupation		Check					
Self-employed	Insurance							
Receipt For:		Year-to-Date ▼	1					
Primary General		600.00						
Other (specify)		600.00						
CURTOTAL of Descipto This Daws (antique)	NIPTOTAL of Passints This Page (entional)							
SUBTOTAL of Receipts This Page (optional)		······						
TOTAL This Period (last page this line number only	ly)	>						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 96 / 173
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_				13 14	15 16 17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	/ not be sold or used by any perso dress of any political committee to	n for the purpose of soliciti solicit contributions from s	ng contributions uch committee.
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,		
$ \rangle$	National Association of Insurance and	Financial A	dvisors Political Action Com-	mit-	
	tee	i manolal / k	avioció i cinical richem com		
_	Full Name (Last, First, Middle Initial)				
A.	Mr. Bruce F. McGuirk, CLU, ChFC,			Date of Receipt	
	Mailing Address 6002 Armfield Court			M M / D D D 1 1	2007
	City	State	Zip Code		
	Summerfield	NC	27358-9128	Transaction ID: R49	
		INC	27330-3120	Amount of Each Rec	eipi iriis Period
	FEC ID number of contributing federal political committee.	C			550.00
				Check	
	Name of Employer Self-employed	Occupation		Crieck	
		Insurance			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		550.00		
	Other (specify)	0 0	0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)				
В.				Date of Receipt	
	Mailing Address S764 Hanson Road			M M / D D	/ Y
				10 10	2007
	City	State	Zip Code	Transaction ID: R48	39260
	Spencer	WI	54479	Amount of Each Rec	eipt this Period
	FEC ID number of contributing	C			51.00
	federal political committee.				
	Name of Employer Self-employed	Occupation	n	Payroll Deduction	
	Self-employed	Insurance	e Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		405.00	1	
	Other (specify)	0 0	+03.00		
	Full Name (Lost First Middle Initial)				
C.	Full Name (Last, First, Middle Initial) Mr. Stephen R. McNeely, CLU,ChFC,L			Date of Receipt	
-	Mailing Address 6190 Winford Dr			M M / D D	/ Y Y Y Y
				10 10	2007
	City	State	Zip Code	Transaction ID: R48	39331
	Indianapolis	IN	46236-8378	Amount of Each Rec	eipt this Period
	FEC ID number of contributing	С			22.50
	federal political committee.	<u> </u>			22.00
	Name of Employer Self-employed		n	Payroll Deduction	
			e Agent		
-			e Year-to-Date ▼	7	
Primary General Other (specify) ▼			0.10,00	1	
			213.00		
_					
					602 50
S	UBTOTAL of Receipts This Page (optional)		······		623.50
T	OTAL This Period (last page this line number of	only))		

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 97 / 173
TEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12
- '			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	ime and add	aress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial Ad	dvisors Political Action Com	mit-
_	Full Name (Last, First, Middle Initial)			5. (5.)
	Mr. Thomas D. McNeil Mailing Address 49 Hagen Oaks Ct			Date of Receipt
				10 10 2007
	City	State	Zip Code	Transaction ID: R489314
	Alamo EEC ID number of contributing	CA	94507	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	-
	Primary General	7.99.094.0		
	Other (specify)		250.00	
	Full Name (Last, First, Middle Initial) Mr. Carl F. Mehlhop, CLU, ChFC			Date of Receipt
	Mailing Address 89 Van Ripper Ln			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489664
	Orinda	CA	94563-1129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	4
	Primary General	Aggregate		
	Other (specify) ▼		210.00	
_	Full Name (Last, First, Middle Initial) Ms. Linda J. Melson, LUTCF, CLU			Date of Receipt
<i>J</i> .	Mailing Address 1810 W. Illinois			M M / D D / Y Y Y Y
		O	7: 0 !	10 10 2007
	City Midland	State TX	Zip Code 79701	Transaction ID: R489283 Amount of Each Receipt this Period
	FEC ID number of contributing		10.01	
	federal political committee.	C		21.00
	Name of Employer	Occupation	า	Payroll Deduction
	Self-employed	Insurance		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	0 0	210.00	
SI	JBTOTAL of Receipts This Page (optional)			67.00
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T	OTAL This Period (last page this line number on	ly)	>	

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 98 / 173 (check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F	Financial A	dvisors Political Action Com	mit-
٠ ٩.	Full Name (Last, First, Middle Initial) Mr. David A. Middaugh, CLU, AEP			Date of Receipt
	Mailing Address 3273 Evergreen Road			10 10 2007
	City	State ND	Zip Code	Transaction ID: R490386
	Fargo		58102-1214	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		126.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1260.00	
3.	Full Name (Last, First, Middle Initial) Mr. Carl W. Middleton, Ill, CLU Ch			Date of Receipt
	Mailing Address 8500 Gordon Dr NE			10 10 / 2007
	City	State	Zip Code	Transaction ID: R488579
	Bain Bridge Is.	WA	98110-3003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
— Э.	Full Name (Last, First, Middle Initial) Mr. Mark E. Miehe, CLU, ChFC			Date of Receipt
	Mailing Address 625 N Segoe Rd Unit 807			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490723
	Madison	WI	53705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Self-employed	Occupation		Check
	Receipt For: ☐ Primary ☐ General Other (specify) ▼		e Year-to-Date ▼ 300.00	
SI	UBTOTAL of Receipts This Page (optional)			447.00
T	OTAL This Period (last page this line number o	nly)	<u> </u>	

SCHEDULE A (FEC Form	3X)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Repo or for commercial purposes, other than u	rts and Statements may using the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Insurar tee	ice and Financial A	dvisors Political Action Com	ımit-
Full Name (Last, First, Middle Initial) Mr. John R. Milam, CLU Mailing Address 426 Heathermo City Knoxville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State TN C Occupatio		Date of Receipt M M M / D D / Y Y Y Y Y 1 0
Full Name (Last, First, Middle Initial) Mr. Michael J. Milburn, LUTCF Mailing Address 2332 Flagstaff City Longmont FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State CO C Occupatio Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R488732 Amount of Each Receipt this Period 22.50 Payroll Deduction
Full Name (Last, First, Middle Initial) Mr. Anthony D. Miller, CLU, ChFC, Mailing Address 4502 Hi-Line D City Billings FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary Other (specify)	State MT C Occupatio Insurance		Date of Receipt 10 10 2007 Transaction ID: R489708 Amount of Each Receipt this Period 50.40 Payroll Deduction
SUBTOTAL of Receipts This Page (op	tional)		572.90
TOTAL This Period (last page this line	number only)	I	

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	nit-
A.	Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State MI C Occupation Insurance Aggregate		Date of Receipt M M J D D D Y Y Y Y Y Y Transaction ID: R489179 Amount of Each Receipt this Period 21.00 Payroll Deduction
3.	Mr. Dennis L. Miller, LUTCF, CLU Mailing Address 649 State Road P.O. Box 186 City Vassar FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State MI C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) Mr. Keith Miller, CLU, ChFC Mailing Address 3704 W. Ashley Lane, 17 City Mequon FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State WI C C Occupation Insurance		Date of Receipt M M O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S	UBTOTAL of Receipts This Page (optional)			363.50
T	OTAL This Period (last page this line number on	ly))	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 101 / 173
TEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12
-	- - -		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. Richard L. Miller			Date of Receipt
	Mailing Address 1214 Karr Ave.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489241
	Yakima	WA	98902-5026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer	Occupation	1	Payroll Deduction
	Self-employed	Insurance	e Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		218.00	
3.	Full Name (Last, First, Middle Initial) Mr. Herbert F. Mischke, CLU, ChFC			Date of Receipt
	Mailing Address 322 East County Road D			10 10 / 2007
	City	State	Zip Code	Transaction ID: R490166
	<u>Little Canada</u>	MN	55117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:		Year-to-Date V	-
	Primary General	7.99.094.0		
	Other (specify) ▼		210.00	
	Full Name (Last, First, Middle Initial) Ms. Dianne C. Mitchell			Date of Receipt
	Mailing Address 2209 Ontario Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487262
	Bellingham	WA	98226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
S	UBTOTAL of Receipts This Page (optional)			71.00
_				
T	OTAL This Period (last page this line number onl	y)		

S	CHEDULE A (FEC Form 3X)		l le e e e e e e e e e e e e e e e e e	FOR LINE NUMBER: PAGE 102 / 173
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11	EIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and States for commercial purposes, other than using the i	atements may	not be sold or used by any person of any person of any political committee to	on for the purpose of soliciting contributions
<u></u>	NAME OF COMMITTEE (In Full)	Tarro arra auc		
$ \rangle$	National Association of Insurance and	Financial Ad	dvisors Political Action Com	mit-
	tee			
_	Full Name (Last, First, Middle Initial)			B
Α.	Mr. James E. Mitchell, LUTCF, CTP Mailing Address 2209 Ontario			Date of Receipt
	Walling Address 2209 Officiallo			10 10 2007
	City	State	Zip Code	Transaction ID: R488053
	Bellingham	WA	98229-4027	Amount of Each Receipt this Period
	FEC ID number of contributing	С		60.00
	federal political committee.			00.00
	Name of Employer	Occupation	<u> </u>	Payroll Deduction
	Self-employed	Insurance		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		675.00	1
	Other (specify)	0 0	073.00	
	Full Name (Last First Middle Initial)			
В.	Full Name (Last, First, Middle Initial) Mr. Martin Montefel, CLU			Date of Receipt
	Mailing Address 16932 SW 5th Way			M M M / D D / Y Y Y Y
	-			10 10 2007
	City	State	Zip Code	Transaction ID: R490019
	Weston	<u> </u>	33326-1564	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	rederal political committee.			Payroll Deduction
	Name of Employer Self-employed	Occupation		Fayron Deduction
		Insurance	<u> </u>	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)	' '	800.00	
_	Full Name (Last, First, Middle Initial)			
C.	Mr. James W. Monteverde			Date of Receipt
	Mailing Address WaterWorks Road			10 10 2007
	City	State	Zip Code	Transaction ID: R490458
	Sewickley	PA	15143	Amount of Each Receipt this Period
	FEC ID number of contributing	<u> </u>		50.00
	federal political committee.	C		
	Name of Employer	Occupation	1	Payroll Deduction
Self-employed		Insurance		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	500.00	1
	Other (specify) ▼		300.00	1
,	UBTOTAL of Receipts This Page (optional)			160.00
۲	COLOTAL OF HECEIPLE THIS Page (optional)			

TOTAL This Period (last page this line number only)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 103 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
	Full Name (Last, First, Middle Initial)			
۹.	Mr. Robert J. Morales, LUTCF, CLT			Date of Receipt
	Mailing Address 1125 Wyoming Avenue			10 10 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487941
	Reno	NV	89503-3342	Amount of Each Receipt this Period
	FEC ID number of contributing		00000 00 .2	
	federal political committee.	C		60.00
	Name of Employer Self-employed	Occupation	n	Payroll Deduction
		Insurance		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		600.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial) Mr. Raymond H. Moran, CLU, ChFC			Date of Receipt
٠.	Mailing Address 5463 Irvin Park Cove			M M / D D / Y Y Y Y
	Tham ig the see 5400 HVIII I dik 60VC			10 10 2007
	City	State	Zip Code	Transaction ID: R490210
	Memphis	TN	38119	Amount of Each Receipt this Period
	FEC ID number of contributing	C		42.00
	federal political committee.			
	Name of Employer Self-employed	Occupation	n	Payroll Deduction
	Self-employed	Insurance	e Agent	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	, , , ,	420.00	
	Other (specify)	0 0		
Э.	Full Name (Last, First, Middle Initial) Mr Joseph L Morton, III,JD			Date of Receipt
	Mailing Address 5487 N. Bach			10 10 2007
	City	State	Zip Code	Transaction ID: R486965
	Meridian	ID	83642	Amount of Each Receipt this Period
	FEC ID number of contributing			126.00
	federal political committee.	C		120.00
	Name of Employer	Occupation	 n	Payroll Deduction
	Self-employed	Insurance		
	Receipt For:		e Year-to-Date ▼	7
	Primary General	1 1	1302.00	
	Other (specify)		1302.00	
				200.00
S	UBTOTAL of Receipts This Page (optional)		·····	228.00
T	OTAL This Period (last page this line number or	าly)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 104 / 173
TEMIZED RECEIPTS	or each category of the	(check only one)
· · · · · · · · · · · · · · · · · · ·	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statem	nents may not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
National Association of Insurance and Finate	ancial Advisors Political Action Com	mit-
Full Name (Last, First, Middle Initial)		
A. Mr. John P. Mosley, CLU, ChFC,		Date of Receipt
Mailing Address 24 Pitt Street		10 10 2007
City	State Zip Code	Transaction ID: R487686
Portland	ME 04103-4856	Amount of Each Receipt this Period
FEC ID number of contributing	С	23.04
federal political committee.		
Name of Employer Self-employed	Occupation	Payroll Deduction
	nsurance Agent	_
	Aggregate Year-to-Date ▼	. [
Primary General Other (specify) ▼	207.36	
	0 0 0 0 0 0 0 0 0	1
Full Name (Last, First, Middle Initial)		
Mr. John P. Mosley, CLU, ChFC,		Date of Receipt
Mailing Address 24 Pitt Street		10 11 2007
City	State Zip Code	Transaction ID: R490491
Portland	ME 04103-4856	Amount of Each Receipt this Period
FEC ID number of contributing	C	-23.04
federal political committee.		
Name of Employer Self-employed	Occupation	─ RT
	nsurance Agent	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	207.36	
_ same (species) V	0 0 0 0 0 0 0 0 0	1
Full Name (Last, First, Middle Initial)		2. 72 1.
Ms. Adrienne Mouch, CLU Mailing Address 1715 N. Westshare Divid #6	200	Date of Receipt
Mailing Address 1715 N Westshore Blvd. #9	900	10 30 2007
City	State Zip Code	Transaction ID: R491820
<u>Tampa</u>	FL 33607	Amount of Each Receipt this Period
FEC ID number of contributing	C	250.00
federal political committee.		
Self-employed 1	Occupation	Credit Card
	nsurance Agent	4
Receipt For: Primary General	Aggregate Year-to-Date ▼	1
Other (specify)	250.00	
	<u> </u>	4
		250.00
SUBTOTAL of Receipts This Page (optional)	·····	250.00
TOTAL This Period (last page this line number only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any or f	y information copied from such Reports and Stat or commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Mark Booth Murphy, CLU, ChFC Mailing Address 37 Gloucester Rd City Summit FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Michael G. Murphy, LUTCF	State NJ C Occupation Insurance Aggregate		Date of Receipt M M M / 12 2007 Transaction ID: R490862 Amount of Each Receipt this Period 300.00 Check
	Mailing Address 1014 S. 54th St. City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NE C Occupation Insurance Aggregate		Transaction ID: R488034 Amount of Each Receipt this Period 28.00 Payroll Deduction
C.	Full Name (Last, First, Middle Initial) Mr. Michael G. Murphy, LUTCF Mailing Address 1014 S. 54th St. City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NE C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SI	JBTOTAL of Receipts This Page (optional)		······	300.00
TC	OTAL This Period (last page this line number or	ıly))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Stator commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) National Association of Insurance and F			
Α.	Full Name (Last, First, Middle Initial) Mr. Robert M. Nelson, CLU, LUTCF Mailing Address 14712 Shirley Street City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State NE C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Mr. Dan E. Nicholas, CLU, CLTC Mailing Address 206 Pacheco Ave City Santa Cruz FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State CA C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: R489556 Amount of Each Receipt this Period 21.00 Payroll Deduction
	Primary General Other (specify) ▼		210.00	
C.	Full Name (Last, First, Middle Initial) Mr. John F. Nichols, CLU, DIA Mailing Address 1331 W Norwood Avenu City Chicago FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State IL C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R487800 Amount of Each Receipt this Period 42.00 Payroll Deduction
SI	JBTOTAL of Receipts This Page (optional)			113.00
TO	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 107 / 173			
ITEMIZED RECEIPTS			or each category of the	(check only one) X 11a		
			Detailed Summary Page	13 14 15 16 17		
Ar	ny information copied from such Reports and Si for commercial purposes, other than using the	tatements may	not be sold or used by any person	on for the purpose of soliciting contributions		
7	NAME OF COMMITTEE (In Full)	Tiame and add	diess of any political committee to	Solicit contributions from Such committee.		
\rangle	National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-		
_	Full Name (Last, First, Middle Initial)			Data of Danailat		
Α.	Ms. Shirley A. Nielsen, LUTCF, CLU Mailing Address 2817 Circle Drive			Date of Receipt		
				10 10 2007		
	City	State	Zip Code	Transaction ID: R490383		
	Grand Island	NE	68801	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction		
	Receipt For:		e Year-to-Date ▼			
	Primary General		500.00	1		
	Other (specify) ▼	0 0	000.00			
В.	Full Name (Last, First, Middle Initial) Mr. Stephen D. Noblin, CLU,ChFC,L			Date of Receipt		
	Mailing Address 128 dogwood Lane			M M / D D / Y Y Y Y Y Y 1 D D / 2 0 0 7		
	City	State	Zip Code	Transaction ID: R487607		
	Cowpens	SC	29330	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		21.00		
	Name of Employer Self-employed	Occupation		Payroll Deduction		
	Receipt For:	Insurance Aggregate	e Year-to-Date V			
	Primary General	199.194.1		1		
	Other (specify) ▼		210.00			
С.	Full Name (Last, First, Middle Initial) Mr. Frank R. Nolimal, CLU, ChFC,			Date of Receipt		
Ο.	Mailing Address 2017 Grafton Ave			M M / D D / Y Y Y Y		
				10 10 2007		
	City Henderson	State NV	Zip Code 89014	Transaction ID: R490303		
	FEC ID number of contributing		09014	Amount of Each Receipt this Period		
	federal political committee.	C		60.00		
Name of Employer Self-employed Receipt For: Occupation Insurance Aggregate			Payroll Deduction			
		e Year-to-Date V	\dashv			
	Primary General	00 0		1		
	Other (specify)	0 0	600.00			
	SUBTOTAL of Receipts This Page (optional)			131.00		
۲	rage (optional)					
т	TOTAL This Period (last page this line number only)					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fittee	nancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas C. Noll, CLU, ChFC Mailing Address 1420 Farm House Lane City Middletown FEC ID number of contributing federal political committee.	State PA	Zip Code 17057-2977	Date of Receipt M M / D D / Y Y Y Y Y 1 0 2 0 0 7 Transaction ID: R490240 Amount of Each Receipt this Period 5.00
	Name of Employer Self-employed Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Mr. Thomas C. Noll, CLU, ChFC Mailing Address 1420 Farm House Lane	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Middletown	PA	17057-2977	Transaction ID: R490826 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00 Credit Card
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		
Full Name (Last, First, Middle Initial) Mr. Thomas C. Noll, CLU, ChFC Mailing Address 1420 Farm House Lane			Date of Receipt 1 0 2 6 2 0 0 7	
	City	State	Zip Code	Transaction ID: R491642
	Middletown FEC ID number of contributing federal political committee.	PA C	17057-2977	Amount of Each Receipt this Period 201.25
	Name of Employer Self-employed	Occupation Insurance	e Agent	Credit Card
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 301.25	
s	UBTOTAL of Receipts This Page (optional)			256.25
T	OTAL This Period (last page this line number onl	v)		

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 11a 11b 11b 13 14	PAGE 109 / 173 11c
Any information or for commercia	copied from such Reports and Stal purposes, other than using the	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of solicit solicit contributions from s	ing contributions such committee.
NAME OF C	OMMITTEE (In Full)		dvisors Political Action Com		
Full Name (L Mr. Brian E. C Mailing Addre City Richfield FEC ID numl federal politic Name of Employee	per of contributing al committee.	State WI C Occupation Insurance	e Agent	Date of Receipt 10 10 Transaction ID: R4 Amount of Each Receipt Payroll Deduction	2 0 0 7 87574
Receipt For: Primary Other (y General specify) ▼	Aggregate	Year-to-Date ▼ 582.00		
Mr. James W. Mailing Addre City ENKA FEC ID numl federal politic Name of Employe Receipt For: Primary Other (oloyer d / General specify) ▼	State NC C Occupation Insurance Aggregate		Date of Receipt 10 10 Transaction ID: R4 Amount of Each Receipt Payroll Deduction	
City Saint Geor FEC ID numl federal politic Name of Employe Receipt For: Primary	ss 1173 South 250 West Suite 201 ge per of contributing al committee. ployer d	State UT C Occupation Insurance Aggregate		Date of Receipt 10 10 Transaction ID: R4 Amount of Each Re Payroll Deduction	
SUBTOTAL of	Receipts This Page (optional)		······		245.50
TOTAL This P	eriod (last page this line number o	only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 173 (check only one) X
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Ms. Martha N. Olmstead, CLU, ChFC, Mailing Address 56 Divisadero St City San Francisco FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State CA C Occupation Insurance Aggregate	e Agent e Year-to-Date ▼	Date of Receipt M M J D D J D J D J D J D J D J D D J D
	Other (specify) Full Name (Last, First, Middle Initial)	0 0	250.00	
3.	Ms. Rae Lee Olson Mailing Address 218 N El Monte Ave City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Los Altos FEC ID number of contributing federal political committee.	CA	94022-2354	Amount of Each Receipt this Period 42.50
	Name of Employer Self-employed Receipt For: Primary General	Occupation Insurance Aggregate	e Agent e Year-to-Date ▼	Payroll Deduction
	Other (specify) ▼	0 0	425.00	
Э.	Full Name (Last, First, Middle Initial) Mr. Mitchell W. Ostrove, CLU, ChFC Mailing Address 4 New King Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City White Plains	State NY	Zip Code 10604-1202	Transaction ID: R489453
	FEC ID number of contributing federal political committee.	C	10004-1202	Amount of Each Receipt this Period 42.00
	Name of Employer Self-employed	Occupation	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 420.00	
s	UBTOTAL of Receipts This Page (optional)		······	109.50
T	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 111 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
•••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	ay information copied from such Reports and Sta	otomonte may	y not be cold or used by any perso	
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and F tee	mit-		
A.	Full Name (Last, First, Middle Initial) Mr. Todd A. Otto			Date of Receipt
	Mailing Address 945 Senior Ave			10 10 2007
	City	State	Zip Code	Transaction ID: R487502
	Dickinson	ND	58601-3757	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.20
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	1	Year-to-Date ▼	
	Primary General	1 1	226.80	1
	Other (specify)	0 0	220.00	
В.	Full Name (Last, First, Middle Initial) Mr. Gary M. Owens, LUTCF			Date of Receipt
	Mailing Address PO Box 835			M M / D D / Y Y Y Y
	011	01-1-	7's Oads	10 10 2007
	City Sultan	State WA	Zip Code	Transaction ID: R488001
		WA	98294	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.50
	Name of Franksia	10		Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		
	Receipt For:		Year-to-Date ▼	-
	Primary General	00 0		1
	Other (specify)	0 0	425.00	
_	Full Name (Last, First, Middle Initial)			Data of Bassint
C.	Mr. Roger L. Owens, LUTCF, RHU Mailing Address 51 Lance Ct			Date of Receipt
	Walling Address ST Lance Of			10 10 2007
	City	State	Zip Code	Transaction ID: R487942
	Elkton	MD	21921-7219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	rederai politicai committee.			Payroll Deduction
	Name of Employer Self-employed	Occupation		1 ayron beduction
			e Agent Year-to-Date ▼	_
	Primary General	Aggregate	Total to Date V	1
	Other (specify) ▼	0 0	470.00	
				109.70
S	UBTOTAL of Receipts This Page (optional)		······	109.70
T	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 173 (check only one) X
An or	ly information copied from such Reports and Stati for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. Aldous Kawailani Paalani Mailing Address 2219 Kaululaau Street City Honolulu FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State HI C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	Aggregate	500.00	
3.	Full Name (Last, First, Middle Initial) Mr. John Palladino, Jr. Mailing Address 15060 Becky Lane			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Monte Sereno	State CA	Zip Code 95030-2106	Transaction ID: R488150 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33030-2100	42.00
	Name of Employer Self-employed Receipt For: Primary General	Occupation Insurance Aggregate		Payroll Deduction
	Other (specify) ▼	0 0	376.00	
).	Full Name (Last, First, Middle Initial) Mr. Joseph S. Pantozzi, CLU, ChFC Mailing Address PO Box 95063			Date of Receipt M
	City	State	Zip Code	Transaction ID: R489984
	Las Vegas FEC ID number of contributing federal political committee.	C	89193	Amount of Each Receipt this Period 60.00
	Name of Employer Self-employed	Occupation	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 600.00	
s	UBTOTAL of Receipts This Page (optional)			152.00
т.	OTAL This Period (last page this line number on	lv)		

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ime and add	ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial Ad	lvisors Political Action Com	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. John C. Parker, RHU, LTCP			Date of Receipt
	Mailing Address 47 Laurel Hill Drive			10 10 2007
	City	State	Zip Code	Transaction ID: R490460
	Niantic FEC ID number of contributing federal political committee.	CT	06357-1536	Amount of Each Receipt this Period 25.00
	Name of Employer Self-employed	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
₹	Full Name (Last, First, Middle Initial) Mr. Clinton J. Parks			Date of Receipt
.	Mailing Address 4848 Rivervale St Rt			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488151
	Soquel FEC ID number of contributing federal political committee.	CA	95073-9727	Amount of Each Receipt this Period 22.50
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	
) .	Full Name (Last, First, Middle Initial) Mr. Joseph M. Partise, CLU			Date of Receipt
Mailing Address 3540 Fern Circle				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State CA	Zip Code	Transaction ID: R489543
	Seal Beach FEC ID number of contributing federal political committee.	C	90740-2846	Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
S	UBTOTAL of Receipts This Page (optional)			68.50
_	ago (opiional)			

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 173 (check only one) X
An or	ly information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fittee	nancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. Barton C. Pasco, CLU, ChFC, Mailing Address 309 Running Cedar Lane City Richmond FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State VA C C C C C C C C C C C C C C C C C C C		Date of Receipt M M M / D D M 2007 Transaction ID: R490049 Amount of Each Receipt this Period 50.00 Payroll Deduction
	Primary General Other (specify) ▼	0 0	517.50	
3.	Full Name (Last, First, Middle Initial) Ms. Debbie K. Paul, CLU, ChFC Mailing Address 4001 MacArthur Blvd Sui City Newport Beach FEC ID number of contributing federal political committee. Name of Employer Self-employed	state CA C Occupation		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R489888 Amount of Each Receipt this Period 42.50 Payroll Deduction
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 425.00	
D.	Full Name (Last, First, Middle Initial) Mr. Gary H. Pendleton, CLU, ChFC Mailing Address 2601 Oberlin Rd City Raleigh FEC ID number of contributing	State NC	Zip Code 27608-1319	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance		Payroll Deduction
s	UBTOTAL of Receipts This Page (optional)			138.33
T	OTAL This Period (last page this line number onl	v)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 115 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
•	LIVIIZED REGEN 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
۸n	w information copied from such Poperts and Statem	onte may	not be sold or used by any person	
or	y information copied from such Reports and Stateme for commercial purposes, other than using the name	e and add	ress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Fina tee	ıncial Ad	visors Political Action Comr	nit-
۹.	Full Name (Last, First, Middle Initial) Ms. Shelly D. Pensky, LLC			Date of Receipt
	Mailing Address 2855 S. 4th Avenue #118			10 10 2007
		State	Zip Code	Transaction ID: R490145
	Yuma /	AZ	85364-8150	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		30.00
	Name of Employer Oc	ccupation		Payroll Deduction
	Self-employed In	Isurance	Agent	
	Receipt For:	ggregate	Year-to-Date ▼	
	Primary General	1 1	300.00	
	Other (specify) ▼	1 1	000.00	
3.	Full Name (Last, First, Middle Initial) Mr. C. Wayne Perkins, LUTCF			Date of Receipt
	Mailing Address P. O. Box 397	10 10 / 10 / 2007		
	•	State	Zip Code	Transaction ID: R487514
	Oxford I	MS	38655-0397	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.50
	Name of Employer Oc Self-employed	ccupation		Payroll Deduction
		surance		
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		225.00	
		0 0		
Э.	Full Name (Last, First, Middle Initial) Ms. Andrea L. Perlmutter			Date of Receipt
	Mailing Address 20 W. 64th St. # 365			10 12 2007
	City	State	Zip Code	Transaction ID: R490847
	New York	NY	10023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
				Check
	Self-employed	ccupation		- Circuit
		surance	Year-to-Date ▼	
	Primary General	ggregate	Teal-10-Date ▼	
	Other (specify) ▼	0 0	250.00	
-	IIPTOTAL of Possints This Page (antional)			302.50
3	UBTOTAL of Receipts This Page (optional)		······	
T	OTAL This Period (last page this line number only) .			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) or each category of the	(check only one)
I EWILED NECEIP 13	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name ar	s may not be sold or used by any person nd address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Association of Insurance and Financ tee	ial Advisors Political Action Comm	nit-
Self-employéd Insu	te Zip Code 33146 spation rance Agent regate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Self-employed Insu	•	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Self-employed 1 Insu	•	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		797.50
TOTAL This Period (last page this line number only)		

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 173 (check only one) X
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. A. Duer Pierce, Jr. Mailing Address 5818 Kennett Pike City Wilmington FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State DE C Occupation Insurance Aggregate	e Agent e Year-to-Date ▼	Date of Receipt M M M / 10 2007 Transaction ID: R488010 Amount of Each Receipt this Period 25.00 Payroll Deduction
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mrs. Cyndy M. Pierson Mailing Address 13800 Vista Dorada	0 0	500.00	Date of Receipt
	City Salinas FEC ID number of contributing federal political committee.	State CA	Zip Code 93908-9443	Transaction ID: R487759 Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
- .	Full Name (Last, First, Middle Initial) Mr. R. Jan Pinney, CLU, ChFC, Mailing Address 5152 Ellington Court City Granite Bay FEC ID number of contributing federal political committee. Name of Employer Self-employed	State CA C Occupation Insurance		Date of Receipt M M J D D J Z D O 7 Transaction ID: R489460 Amount of Each Receipt this Period 208.00 Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	1	e Year-to-Date ▼ 2080.00	
s	UBTOTAL of Receipts This Page (optional)		>	254.00
Т	OTAL This Period (last page this line number or	nlv)	.	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 173 (check only one) X
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. James D.C. Pirkle		202		Date of Receipt
	Mailing Address 395 Del Monte Ctr Suite			10 10 2007
	City Monterey	State CA	Zip Code 93940	Transaction ID: R487684 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Joseph E. Pittman			Date of Receipt
	Mailing Address 7430 Vinton Street	10 10 2007		
	City	State	Zip Code	Transaction ID: R488208
	Omaha FEC ID number of contributing federal political committee.	NE C	68124	Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
- C.	Full Name (Last, First, Middle Initial) Mr. William Poe, Jr.,CLU			Date of Receipt
Mailing Address 2397 Samuelson Rd				10 10 / 2007
	City Portage	State IN	Zip Code 46368-2531	Transaction ID: R487914 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10000 2001	25.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			71.00
т.	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 119 / 173
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
National Association of Insurance and Finatee	ancial Ad	dvisors Political Action Comr	nit-
Full Name (Last, First, Middle Initial) A. Mr. B. Keith Potts			Date of Receipt
Mailing Address P.O. Box 821			10 10 7 2007
City	State	Zip Code	Transaction ID: R487472
Wolfforth	TX	79382	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		35.00
Self-employed	Occupation		Payroll Deduction
	nsurance Aggregate	Year-to-Date ▼	-
Primary General Other (specify) ▼	99-19	315.00	
Full Name (Last, First, Middle Initial) 3. Mr. Charles W. Potts, CLU, RHU,			Date of Receipt
Mailing Address 12725 St. Andrews Ter			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R489957
Oklahoma City	OK	73120-8807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Self-employed	Occupation nsurance		Payroll Deduction
		Year-to-Date ▼	
Primary General		300.00	
Other (specify)	0 0	300.00	
Full Name (Last, First, Middle Initial) Mr. Bradley W. Pratt, CLU, LUTCF			Date of Receipt
Mailing Address 2118 Peregrine Lane			10 10 7 2007
City	State	Zip Code	Transaction ID: R488139
Mankato	MN	56003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Self-employed *	Occupation nsurance		Payroll Deduction
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)			90.00
TOTAL This Period (last page this line number only))	>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 120 / 1/3
ITI	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
	-		Detailed Summary Page	13 14 15 16 17
Any or f	r information copied from such Reports and Statem or commercial purposes, other than using the name	ents may e and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and Fina tee	ncial Ac	dvisors Political Action Comr	mit-
۹. ۱	Full Name (Last, First, Middle Initial) Mr. Alan Press, CLU, LUTC			Date of Receipt
	Mailing Address 10 Pine Terrace	.		10 19 2007
	•	State NJ	Zip Code 07627-1213	Transaction ID: R491252
	FFC ID number of contribution	C	0/02/-1213	Amount of Each Receipt this Period 500.00
	Self-employed	ccupation surance		Credit Card
			Year-to-Date ▼	
	Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Ms. Laurene B. Prevette, LUTCF, RHU			Date of Receipt
	Mailing Address 741 Romany Road			10 10 2007
	,	State	Zip Code	Transaction ID: R490448
		NC	28203-4849	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			27.50
	Self-employed	ccupation surance		Payroll Deduction
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		275.00	
	Full Name (Last, First, Middle Initial) Mr. Henry L Prien, CLU,LUTCF			Date of Receipt
	Mailing Address 415 38th St S Ste E			10 10 7 2007
	•	State ND	Zip Code	Transaction ID: R490273
	FFO ID accombined of a carbollo discon		58103-1190	Amount of Each Receipt this Period
	federal political committee.	C		50.40 Payroll Deduction
	Self-employed 1	ccupatior Isurance		1 ayron beduction
			Year-to-Date ▼	
	Primary General Other (specify) ▼		505.20	
SI	JBTOTAL of Receipts This Page (optional)			577.90
τc	TAL This Period (last page this line number only)		•	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 121 / 173
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u>~</u>	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and F tee	inancial A	dvisors Political Action Com	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. Randall S. Prout			Date of Receipt
	Mailing Address 651 W 9th St			10 10 7 2007
	Claramant	State	Zip Code	Transaction ID: R487479
	Claremont	CA	91711-3742	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		210.00	
3.	Full Name (Last, First, Middle Initial) Ms. Johanna Margaret-Mary Raisch			Date of Receipt
	Mailing Address 7864 Highlander Dr			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490329
	Anchorage	AK	99518	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	-
	Primary General	33 13		
	Other (specify)	0 0	225.00	
·	Full Name (Last, First, Middle Initial) Ms. Johanna Margaret-Mary Raisch			Date of Receipt
	Mailing Address 7864 Highlander Dr			M M / D D / Y Y Y Y
	City	State	Zip Code	10 15 2007
	Anchorage	AK	99518	Transaction ID: R491042 Amount of Each Receipt this Period
	FEC ID number of contributing			-25.00
	federal political committee.	C		
	Name of Employer Self-employed	Occupation		T RT
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	-
	Primary General	Aggregate		
	Other (specify) ▼		225.00	
s	UBTOTAL of Receipts This Page (optional)			21.00
_	OTAL This Period (last page this line number on	lv)		
	VIAL THIS I SHOW (LAST PAYS THIS HITS HUTTIDE OF	ı y)	·······	

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Barry K. Rake, LUTCF Mailing Address 1004 Dawne Drive City Williamsport FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State PA C Occupation Insurance Aggregate		Date of Receipt M M J D D J Z D D Z D D Z D D Z D D Z D D D Z D D D Z D D D Z D D D Z D D D D Z D D D D Z D
3.	Full Name (Last, First, Middle Initial) Mr. Edward F. Randolph Mailing Address 1515 Mill Bay Road City Kodiak FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State AK C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R487483 Amount of Each Receipt this Period 42.00 Payroll Deduction
Э.	Full Name (Last, First, Middle Initial) Ms. Jeri L. Regan, CLU, ChFC, Mailing Address 2616 No. 100th Avenue City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NE C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S	UBTOTAL of Receipts This Page (optional)			92.00
T	OTAL This Period (last page this line number or	ıly))	

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any or fo	information copied from such Reports and Sta r commercial purposes, other than using the n	itements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
) 1	NAME OF COMMITTEE (In Full) National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
F fe	Full Name (Last, First, Middle Initial) As. Lynda L. Regan Mailing Address 351 Hicks Valley Rd City Petaluma FEC ID number of contributing ederal political committee. Ilame of Employer Self-employed Receipt For: Primary General Other (specify)	State CA C Occupation Insurance Aggregate		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3. N. N. C.	Full Name (Last, First, Middle Initial) Mr. Robert W. Rensing, LUTCF Mailing Address 2515 S. 105th Ave City Dmaha EC ID number of contributing ederal political committee. Jame of Employer Self-employed Receipt For: Primary General Other (specify)	State NE C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. N. C. S. F. F. F. S. C. S.	Full Name (Last, First, Middle Initial) Mr. Jaime Resendez, LUTCF Mailing Address 1389 W. US Hwy. 77, S City San Benito FEC ID number of contributing ederal political committee. Jame of Employer Self-employed Receipt For: Primary General Other (specify)	State TX C Occupation Insurance		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: R488078 Amount of Each Receipt this Period 21.00 Payroll Deduction
SUI	BTOTAL of Receipts This Page (optional))	163.00
TO	TAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any or f	y information copied from such Reports and Sta or commercial purposes, other than using the n	tements may	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and F			
A.	Full Name (Last, First, Middle Initial) Mr. August P. Richter, IV,LUTCF, Mailing Address 401 Wild Oak Drive City Manitowoc FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State WI C Occupation Insurance Aggregate		Date of Receipt M M J D D J J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John F. Ridoux Mailing Address 911 Thorpe Drive	0 0		Date of Receipt
	City Louisville FEC ID number of contributing	State KY	Zip Code 40243-1959	Transaction ID: R488082 Amount of Each Receipt this Period 25.20
	Name of Employer Self-employed Receipt For: Primary General Other (specify)	Occupation		Payroll Deduction
C .	Full Name (Last, First, Middle Initial) Mr. Michael A. Riffenburg, LUTCF Mailing Address 5111 Borman Drive City Spartanburg	State SC	Zip Code 29301-3411	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.	C		21.00 Payroll Deduction
	Name of Employer Self-employed Receipt For: Primary General Other (specify)	Occupation Insurance Aggregate		- ayron boulding
SI	JBTOTAL of Receipts This Page (optional)			96.60
TC	OTAL This Period (last page this line number or	nly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 173 (check only one) X
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	nit-
۸.	Full Name (Last, First, Middle Initial) Mr. William E. Riley	0 :: 0		Date of Receipt
	Mailing Address 715 N. Washington Blvd.			10 10 2007
	City Sarasota	State FL	Zip Code 34236	Transaction ID: R487980 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	34200	25.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Adi Ringer, LUTCF, CFP Mailing Address 888 Vista Brisa			Date of Receipt
		10 10 2007		
	City San Luis Obispo	State CA	Zip Code 93405	Transaction ID: R487136 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30400	22.50
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Richard R. Rios, CLU, ChFC			Date of Receipt
	Mailing Address 8720 El Chapul Way			10 10 / 2007
	City Fair Oaks	State CA	Zip Code 95628-5454	Transaction ID: R487446
	FEC ID number of contributing federal political committee.	C	93020-3434	Amount of Each Receipt this Period 50.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			97.50
т.	OTAL This Period (last page this line number on	v)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. Robert M. Roach, CLU, ChFC			Date of Receipt
Mailing Address 1287 Harrison Pond Driv	ve		10 10 2007
City	State	Zip Code	Transaction ID: R489686
New Albany FEC ID number of contributing federal political committee.	ОН	43054	Amount of Each Receipt this Period 125.00
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1443.30	
Full Name (Last, First, Middle Initial) Mr. Edwin G. Robinson, Jr., CLU			Date of Receipt
Mailing Address 3777 Parkwood Way	01-1-	7. 0.1	10 22 2007
City West Linn	State OR	Zip Code 97068-1045	Transaction ID: R491339 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.000	250.00
Name of Employer Self-employed	Occupation Insurance		Check
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Ms. Rita J. Robinson, RN, BSN			Date of Receipt
Mailing Address 3777 Parkwood Way			10 10 / 2007
City West Linn	State OR	Zip Code 97068-1045	Transaction ID: R488204
FEC ID number of contributing federal political committee.	C	9/000-1045	Amount of Each Receipt this Period 21.00
Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional)			396.00
TOTAL This Period (last page this line number or	าly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 173 (check only one) X
An or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Ms. Ann Baker Ronn, LUTCF Mailing Address 1360 Post Oak Blvd Ste 1470		1470		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State TX	Zip Code	Transaction ID: R491719
	Houston FEC ID number of contributing federal political committee.	C	77056-3075	Amount of Each Receipt this Period 250.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Check
Full Name (Last, First, Middle Initial) Mr. Harry S. Rosnick, LUTCF Mailing Address 3435 Jefferson Davis Hwy P.O. Box 360				Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487410
	Fredericksburg	VA	22404-0360	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance		1 ayron beddenon
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 310.00	
).	Full Name (Last, First, Middle Initial) Mr. Eric S. Roth, LUTCF			Date of Receipt
	Mailing Address 2 Mckinley Ct.			10 10 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490169
	Monroe Twp FEC ID number of contributing federal political committee.	NJ	08831-4055	Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 210.00	
s	UBTOTAL of Receipts This Page (optional)			296.00
T	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 128 / 173	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
••	EMIZED REGEN 10		Detailed Summary Page	X 11a	7
Δr	by information copied from such Poperts and Sta	stomonte may	r not be cold or used by any norse		
or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)		_		
\rangle	National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-	
Α.	Full Name (Last, First, Middle Initial) Ms. Shelley M. Rowe, LUTCF			Date of Receipt	
	Mailing Address 5908 E. Conservation D			10 10 2007	
Longmont CO		State	Zip Code	Transaction ID: R487879	
		80504	Amount of Each Receipt this Period	-	
	FEC ID number of contributing federal political committee.	C		37.50	
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		375.00		
	Other (specify)	0 0	373.00		
В.				Date of Receipt	
	Mailing Address 103 Fourth Street			10 10 2007	
	City	State	Zip Code	Transaction ID: R488114	
	Middlesex	NJ	08846-2117	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		15.00	
	Name of Employer Self-employed	Occupation	1	Payroll Deduction	
	Self-employed	Insurance	e Agent		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		205.20		
<u> </u>	Full Name (Last, First, Middle Initial) Mr. William L. Rudd, LUTCF			Date of Receipt	
	Mailing Address 3150 Mollifield Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: R487726	
	Charlottesville	VA	22911	Amount of Each Receipt this Period	_
FEC ID number of contributing federal political committee.		C		21.00	
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction	
-			Year-to-Date ▼		
Primary General			010.00		
	Other (specify) ▼		210.00		
s	UBTOTAL of Receipts This Page (optional)			73.50	
\vdash			•		l
т	OTAL This Period (last page this line number or	nly)	>		L

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 173 (check only one) X
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Ms. Sherri A. Rush, LUTCF Mailing Address 2140 Jefferson St Suite C				Date of Receipt M
	City	State	Zip Code	Transaction ID: R488115
	Napa	CA	94559	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Mr. D. David Russell			Date of Receipt
	Mailing Address 8461 Eagle Preserve Wa	10 10 7 2007		
	City	State	Zip Code	Transaction ID: R487564
	Sarasota FEC ID number of contributing federal political committee.	FL C	34241-9449	Amount of Each Receipt this Period 50.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Daniel L. Rust, LUTCF			Date of Receipt
	Mailing Address 114 W. Arnold			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489497
	Bozeman	MT	59715-6129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00 Payroll Deduction
	Name of Employer Self-employed	Occupation Insurance	e Agent	Taylon Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
s	UBTOTAL of Receipts This Page (optional)			135.00
т.	OTAL This Period (last page this line number on	lv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 1 / 3 (check only one)
Ar	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any pers	on for the purpose of soliciting contributions
\ <u>\ \</u>	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee			
A.	Full Name (Last, First, Middle Initial) Mr. William R. Sapers, CLU Mailing Address 10 Rowes Wharf #1201 City Boston FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State MA C Occupation Insurance Aggregate	e Agent Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u> </u>	Other (specify) Full Name (Last, First, Middle Initial) Mr. Michael P. Saunders, CLU Mailing Address 4560 Ortega Blvd	0 0	250.00	Date of Receipt
	City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State FL C C Occupation Insurance		Transaction ID: R487913 Amount of Each Receipt this Period 21.00 Payroll Deduction
 C.	Mailing Address 3627 - 22nd St.		210.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Kenosha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	State WI C Occupation Insurance Aggregate		Transaction ID: R487727 Amount of Each Receipt this Period 27.00 Payroll Deduction
	UBTOTAL of Receipts This Page (optional)		•	298.00
т	OTAL This Period (last page this line number on	ly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ang or f	y information copied from such Reports and States commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) National Association of Insurance and I tee	inancial A	dvisors Political Action Com	mit-
A .	Full Name (Last, First, Middle Initial) Mr. Walter M. Schieffer, Jr.,LUTCF Mailing Address 17501 John Wayne City Perry FEC ID number of contributing federal political committee. Name of Employer Self-employed	State OK C		Date of Receipt M M J D D J D J D J D J D D J D D D D D
	Receipt For: Primary General Other (specify)	Insurance Aggregate	e Agent e Year-to-Date ▼ 252.00	
3.	Full Name (Last, First, Middle Initial) Mr. Daniel J. Scholz, CLU, ChFC Mailing Address 1510 So. 183 Circle City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NE C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) Mr. Allan B. Schon Mailing Address 441 16th NW City Minot FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State ND C Occupation Insurance Aggregate		Date of Receipt M M J D D J Z D O 7 Transaction ID: R488181 Amount of Each Receipt this Period 30.00 Payroll Deduction
SI	JBTOTAL of Receipts This Page (optional)			160.20
TC	OTAL This Period (last page this line number o	nly)	_	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. Mark B. Schwendeman Mailing Address 427 4th St City Marietta FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State OH C Occupation Insurance Aggregate	e Agent Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R490437 Amount of Each Receipt this Period 30.00 Payroll Deduction
	Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	300.00	
3.	Mr. Walter J. Scott, CLU Mailing Address 1022 WASHINGTON AV City OSHKOSH	'E. State WI	Zip Code 54901-5354	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer	C		50.40 Payroll Deduction
	Self-employed Receipt For: Primary General Other (specify) ▼	Insurance		
Э.	Full Name (Last, First, Middle Initial) Mr. Randy L. Scritchfield, CFP, LUTCF Mailing Address 10105 Nightingale St.			Date of Receipt
	City <u>Gaithersburg</u> FEC ID number of contributing federal political committee.	State MD	Zip Code 20882-4019	Transaction ID: R490463 Amount of Each Receipt this Period 21.00 Payrell Doduction
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
SI	JBTOTAL of Receipts This Page (optional)			101.40
T	OTAL This Period (last page this line number on	ly))	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 133 / 173
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
National Association of Insurance and tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) A. Mr. Harry E. Sechman			Date of Receipt
Mailing Address 13 Beechwood Dr			M M / D D / Y Y Y Y
City	State	Zip Code	10 10 2007
Rutland	MA	01543-1751	Transaction ID: R487981 Amount of Each Receipt this Period
FEC ID number of contributing			30.00
federal political committee.	C		
Name of Employer Self-employed	Occupation		Payroll Deduction
	Insuranc		4
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
Other (specify)		300.00	
			1
Full Name (Last, First, Middle Initial) 3. Ms. Teresa L. Seefeldt, RHU			Date of Receipt
Mailing Address 643 Gaelic Court			10 10 2007
City	State	Zip Code	Transaction ID: R489611
Apopka	FL	32712	Amount of Each Receipt this Period
FEC ID number of contributing	С		21.00
federal political committee.			
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For:	Insuranc	e Agent e Year-to-Date ▼	_
Primary General	Aggregate		1
Other (specify) ▼	0 0	210.00	
Full Name (Last, First, Middle Initial)			
Mr. Dale J. Seymour			Date of Receipt
Mailing Address 2401 Wealdstone Rd.			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R489972
Toledo	ОН	43617	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
	Ossumation		Payroll Deduction
Name of Employer Self-employed	Occupation Insurance		
Receipt For:		e Year-to-Date ▼	7
Primary General		350.00	1
Other (specify) ▼	0 0		1
OUDTOTAL (D. 11 THE D. 11 THE			61.00
SUBTOTAL of Receipts This Page (optional)		······	
TOTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 134 / 173
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)		• •	
\rangle	National Association of Insurance and F tee	inancial Ad	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. James P. Shaheen, LUTCF			Date of Receipt
	Mailing Address 3939 Linden Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487507
	Long Beach	FL	90807-2714	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation	1	Payroll Deduction
		Insurance		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	0 0	210.00	
3.	Full Name (Last, First, Middle Initial) Mr. James A. Shalek, CLU,ChFC			Date of Receipt
	Mailing Address 1706 Candleberry Lane			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487570
	Yorkville	<u>IL</u>	60560-5810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.50
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
	Primary General	Aggregate		
	Other (specify) ▼		457.50	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Brian M. Sharkey, CLU, ChFC			Date of Receipt
	Mailing Address 20 Sleepy Hollow Dr			M M / D D / Y Y Y Y
	City.	Ctata	7in Oada	10 18 2007
	City Newtown Square	State PA	Zip Code 19073-3934	Transaction ID: R491191 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		600.00
	Name of Employer Self-employed	Occupation		Check
		Insurance	e Agent e Year-to-Date ▼	-
	Receipt For: Primary General	Aggregate		
	Other (specify) ▼		600.00	
s	UBTOTAL of Receipts This Page (optional)			663.50
_			<u> </u>	
T	OTAL This Period (last page this line number on	ly)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 135 / 173
ITEMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED RECEIT 13	Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	y information copied from such Reports and Statements for commercial purposes, other than using the name and	may not be sold or used by any person	on for the purpose of soliciting contributions
Or		address of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	Advisors Political Astics Com	
\angle	National Association of Insurance and Financia tee	Advisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Kenneth A. Sherlin, III,LUTCF		Date of Receipt
	Mailing Address 8 First Street		M M / D D / Y Y Y Y Y Y 1 1 0 1 0 2 0 0 7
	City State	Zip Code	Transaction ID: R487903
	Ashville NC	28803-1414	Amount of Each Receipt this Period
	FEO ID combined for a life time.		
	federal political committee.		13.75
	Name of Employer Occupa	ation	Payroll Deduction
	Self-employed Insura	nce Agent	
	Receipt For: Aggree	ate Year-to-Date ▼	
	Primary General	247.50	1
	Other (specify) ▼	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
B.	Full Name (Last, First, Middle Initial) Mr. Troy J. Shreve, CLU		Date of Receipt
٠.	Mailing Address 7100 S 45th Street		M M / D D / Y Y Y Y
	The state of the s		10 10 2007
	City State	Zip Code	Transaction ID: R489820
	<u>Lincoln</u> NE	68516-3016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		42.00
	federal political committee.		
	Name of Employer Occupa	ation	Payroll Deduction
	Salt-amployed	nce Agent	
	Receipt For: Aggree	gate Year-to-Date ▼	
	Primary General	420.00	
	Other (specify) ▼	120.00	1
C.	Full Name (Last, First, Middle Initial) Mr. James John Silbernagel, LUTCF,CFP		Date of Receipt
-	Mailing Address W 2329 Capital Drive		M M / D D / Y Y Y Y
			10 10 2007
	City State	Zip Code	Transaction ID: R488168
	<u>Campbellsport</u> WI	53010-3010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		60.00
Name of Employer Self-employed Occupation Insurance			D
		ation	Payroll Deduction
		nce Agent	
		gate Year-to-Date ▼	
	Primary General	600.00	
_	Other (specify) ▼	0 0 0 0 0 0 0 0	1
	LIPTOTAL of Descirte This David (autism)		115.75
L	UBTOTAL of Receipts This Page (optional)		
Т	OTAL This Period (last page this line number only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 136 / 173
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
	_		Detailed Summary Page	13 14 15 16 17
Ar	ly information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee
<u>.</u>	NAME OF COMMITTEE (In Full)	arro arro ade	ness of any pontion committee to	Solicit Contributions from Sacri Committee.
\rangle	National Association of Insurance and Fitee	nancial A	dvisors Political Action Comr	nit-
Δ	Full Name (Last, First, Middle Initial) Mr. Marc A. Silverman, CLU, ChFC,			Date of Receipt
••	Mailing Address 5770 S.W. 128th Street			M M / D D / Y Y Y Y
	City	State	Zip Code	1 0 1 5 2 0 0 7 Transaction ID: R490936
	Miami	FL	33156-7175	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	1	Check
	Name of Employer Self-employed	Insurance	e Agent	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Alan F. Simonis, Jr.,LUTCF			Date of Receipt
	Mailing Address P. O. Box 1858			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487560
	Huntsville	AL	35807-0858	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00 Payroll Deduction
	Name of Employer Self-employed	Occupation		- Payron Deduction
	Receipt For:	Insurance	e Agent • Year-to-Date ▼	-
	Primary General	, iggi ogaio		
	Other (specify)		210.00	
·	Full Name (Last, First, Middle Initial) Mr. Ken Simons, CLU, ChFC,			Date of Receipt
	Mailing Address 808 Thoroughbred Lane			M M / D D / Y Y Y Y
		Ctoto	Zin Codo	10 10 2007
	City Artesia	State NM	Zip Code 88210-2232	Transaction ID: R489722 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		50.10
	Name of Employer Self-employed	Occupation		Payroll Deduction
		Insurance		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		501.00	
s	UBTOTAL of Receipts This Page (optional)			321.10
<u> </u>	OTAL This Davisd (last need this line asset)	lu)		
- 1	OTAL This Period (last page this line number on	ıy <i>)</i>	······································	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 173 (check only one) X
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Filtee	nancial Ad	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. Frank E. Skaw Mailing Address 18821 E. Crestwood Lane	e		Date of Receipt
	City	State	Zip Code	1 0 1 0 2 0 0 7 Transaction ID: R490132
	Otis Orchards	WA	99027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
3.	Full Name (Last, First, Middle Initial) Mr. C. Phillip Smelley, CIC, LUTCF			Date of Receipt
	Mailing Address 380 Broadmoor Drive	10 10 2007		
	City Fayetteville	State GA	Zip Code 30215	Transaction ID: R490444 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30210	21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
).	Full Name (Last, First, Middle Initial) Ms. Debra N. Smith			Date of Receipt
Mailing Address 1345 Cedar Park PI				10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R488165
	Stone Mountain FEC ID number of contributing federal political committee.	GA C	30083	Amount of Each Receipt this Period 25.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
S	UBTOTAL of Receipts This Page (optional)			67.00
т	OTAL This Period (last page this line number on	v)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 138 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
	LIMIZED RECEIL 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
۸۰	w information assign from such Paparts and State	amonto moi	ret be edd or used by any perse	
or	ny information copied from such Reports and State for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. H. Dan Smith, CLU, LUTCF			Date of Receipt
	Mailing Address 1616 Rio Vista			10 10 7 2007
	City	State	Zip Code	Transaction ID: R489502
	Dallas	TX	75208-2338	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		215.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:		e Year-to-Date ▼	1
	Primary General Other (specify) ▼		2765.00	
3.	Full Name (Last, First, Middle Initial) Mr. Russell A. Smith			Date of Receipt
	Mailing Address 22928 San Joaquin Drive	East		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489526
	Canyon Lake	CA	92587-7831	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		2080.00	
).	Full Name (Last, First, Middle Initial) Mr. David E. Smithkey, CLU, RFC			Date of Receipt
	Mailing Address 9451 Heddy Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489545
	Flushing	MI	48433	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:		e Year-to-Date ▼	7
	Primary General Other (specify) ▼		2080.00	
s	UBTOTAL of Receipts This Page (optional)			631.00
T	OTAL This Period (last page this line number onl	v)		
•	(.act page the mile hamber of	,,		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 173 (check only one) X
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and Itee	inancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. Lawrence Edward Sneed, CLU Mailing Address 5005 Woodminster City Oakland FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State CA C Occupation Insurance Aggregate		Date of Receipt M M
3.	Full Name (Last, First, Middle Initial) Mr. Mark V. Snider, ChFC Mailing Address 44 Elmwood Place City Athens FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State OH C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) Ms. Sharon L. Sparling, CIC Mailing Address P.O. Box 1914 City Mount Vernon FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State WA C Occupation Insurance Aggregate		Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)			108.00
Т	OTAL This Period (last page this line number o	nlv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee			
A .	Full Name (Last, First, Middle Initial) Mr. Preston R. Speece, LUTCF Mailing Address 14620 Fowler Ave City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed	State NE C Occupation Insurance	e Agent	Date of Receipt M M J D D J J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
3.	Full Name (Last, First, Middle Initial) Mr. Marvin L. Spreen, FIC Mailing Address 5759 Mount Vernon Rd City Brenham FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State TX C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) Mr. Walter C. Sprye, Jr., CLU, C Mailing Address 101 Stoney Brook Rd. City Rocky Mount FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NC C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R490184 Amount of Each Receipt this Period 46.20 Payroll Deduction
SI	UBTOTAL of Receipts This Page (optional))	102.20
T	OTAL This Period (last page this line number on	ıly))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee			
۹.	Full Name (Last, First, Middle Initial) Mr. Mark A. Staat Mailing Address 14315 Pine Creek Court	, #202		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R489678
	Holland FEC ID number of contributing	C	49424-1265	Amount of Each Receipt this Period 22.50
	Receipt For: Primary Other (specify) ▼	Occupation Insurance		Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Mr. Lawrence Stack, CLU, ChFC Mailing Address 28411 Northwestern Hwy	y Ste 1300		Date of Receipt
	City	1 0 1 0 2 0 0 7 Transaction ID: R489570		
	Southfield	State MI	Zip Code 48034-5543	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	60.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 520.00	
D.	Full Name (Last, First, Middle Initial) Mr. Ronald T. Staebell			Date of Receipt
	Mailing Address 4309 Town Park Pl.			10 10 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R490165
Sioux Falls SD FEC ID number of contributing federal political committee.			57105	Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 210.00	
SI	UBTOTAL of Receipts This Page (optional)			103.50
T	OTAL This Period (last page this line number or	ıly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fintee	ancial Ad	dvisors Political Action Com	mit-
Α.	Name of Employer Self-employed Receipt For:	State IN C Description Descr		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	0 0	500.00	
3.	Self-employed 1	State MT C Occupation nsurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	300.00	
	Name of Employer Self-employed	State NC C Occupation nsurance Aggregate		Date of Receipt M M
s	UBTOTAL of Receipts This Page (optional)		_	103.10
T	OTAL This Period (last page this line number only))	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ang	v information copied from such Reports and Stat or commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee			
A.	Full Name (Last, First, Middle Initial) Mr. Pierce Allen Stevens, Jr. Mailing Address P O Box 119 City Anguilla FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State MS C Occupation Insurance Aggregate	e Agent • Year-to-Date ▼	Date of Receipt M M J D D J Z D D Z D D Z D D Z D D Z D D D D
	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Matthew B. Stone, LUTCF	0 0	250.00	Date of Receipt
	Mailing Address 212 Stoney Dr. City Durham FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General	State NC C Occupation Insurance Aggregate		Transaction ID: R487099 Amount of Each Receipt this Period 24.75 Payroll Deduction
Э.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Nicholas John Stosic Mailing Address 9820 Dixon Lane City Reno FEC ID number of contributing	State NV	Zip Code 89511-9455	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
sı	JBTOTAL of Receipts This Page (optional)			109.75
TC	OTAL This Period (last page this line number on	ly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Ms. Deborah A. Stratton-Flandro Mailing Address 2595 Spanbauer Rd City American Falls FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State ID C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Full Name (Last, First, Middle Initial) Mr. David L. Stratton, CLU, ChFC, Mailing Address 13115 Beach Cir. City Anchorage FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State AK C Occupation Insurance Aggregate		Date of Receipt M M J D D J Z D O 7 Transaction ID: R490004 Amount of Each Receipt this Period 105.00 Payroll Deduction
C.	Full Name (Last, First, Middle Initial) Mr. Steven M. Stratton, LUTCF,CSA Mailing Address 17131 Parkview Dr City Morgan Hill FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State CA C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)			225.00
т	OTAL This Period (last page this line number or	lv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 173 (check only one) X
Ar or	ly information copied from such Reports and Stator commercial purposes, other than using the r	itements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F	Financial A	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Michael W. Struebing, LUTCF, CLU Mailing Address 16112 Parker Street City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NE C Occupation Insurance Aggregate		Date of Receipt M M J D D Z 2 0 0 7 Transaction ID: R487529 Amount of Each Receipt this Period 42.50 Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Mr. Robert A. Styrkowicz, CLU, LUTCF Mailing Address 25 Monterey Drive City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State IL C Occupation Insurance Aggregate		Date of Receipt M M J D D Z 2007 Transaction ID: R488083 Amount of Each Receipt this Period 65.00 Payroll Deduction
- .	Full Name (Last, First, Middle Initial) Mr. Mark Phelan Sudderberg Mailing Address 1751 Clinton St. City Rockford FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State IL C Occupation Insurance Aggregate		Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)			128.50
T	OTAL This Period (last page this line number o	nlv)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 173 (check only one) X
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
Δ.	Full Name (Last, First, Middle Initial) Mr. Stephen G. Summerlin, CFP Mailing Address 4014 N. W. 15th Street			Date of Receipt M
	City	State	Zip Code	Transaction ID: R490071
	Gainesville	FL	32605-1912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	
3.	Full Name (Last, First, Middle Initial) Mr. Dennis P. Sunderman, CSA Mailing Address 2325 Jeans Ct			Date of Receipt
		10 10 2007		
	City	State	Zip Code	Transaction ID: R487807
	Signal Hill FEC ID number of contributing federal political committee.	CA	90755-4047	Amount of Each Receipt this Period 105.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 735.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Dennis P. Sunderman, CSA			Date of Receipt
	Mailing Address 2325 Jeans Ct			10 15 / Y Y Y Y Y Y
	City Signal Hill	State CA	Zip Code 90755-4047	Transaction ID: R491041 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30700 1017	-105.00
	Name of Employer Self-employed	Occupation Insurance		RT
	Receipt For: Primary General Other (specify)	Aggregate	PYear-to-Date ▼ 735.00	
s	UBTOTAL of Receipts This Page (optional)			42.00
т.	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 147 / 173
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Association of Insurance an tee	d Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. Arthur Ivan Swanson, LUTCF Mailing Address 2270 E. 24TH PL City Yuma FEC ID number of contributing federal political committee.	State AZ	Zip Code 85365-3245	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupatio Insuranc Aggregate		Payroll Deduction
Full Name (Last, First, Middle Initial) Mr. Joseph A. Sztapka Mailing Address 3705 S. Judy Ave	1		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R487767
Sioux Falls FEC ID number of contributing federal political committee.	SD	57103-7248	Amount of Each Receipt this Period 75.00
Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupatio Insuranc Aggregate		Payroll Deduction
Full Name (Last, First, Middle Initial) Mr. Jeffrey J. Taggart Mailing Address 1107 Cedar Ln. P.O. Box 2433 City	State	Zip Code	Date of Receipt M M
Cody FEC ID number of contributing federal political committee.	C	82414-2433	Amount of Each Receipt this Period 50.00
Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupatio Insuranc Aggregate		Payroll Deduction
SUBTOTAL of Receipts This Page (optional)			150.20
TOTAL This Period (last page this line number	er only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial Ac	dvisors Political Action Com	nit-
۹.	Full Name (Last, First, Middle Initial) Mr. Matthew S. Tassey			Date of Receipt
	Mailing Address 5 Reggio Ave.			10 10 2007
	City	State	Zip Code	Transaction ID: R490482
	Old Orchard Beach FEC ID number of contributing federal political committee.	C	04064-2709	Amount of Each Receipt this Period 72.00
	Name of Employer Self-employed	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00	
3.	Full Name (Last, First, Middle Initial) Mr. Gregory M. Telge, CLU, ChFC Mailing Address 1655 North River Road			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Transaction ID: R489702
	Manchester FEC ID number of contributing federal political committee.	C	03104	Amount of Each Receipt this Period 21.00
	Name of Employer Self-employed	Occupation Insurance	e Agent	Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	
Э.	Full Name (Last, First, Middle Initial) Mr. Benson B. Terrell, Jr.,CFP			Date of Receipt
Mailing Address 9261 Lanier Rd				10 10 2007
	City	State	Zip Code	Transaction ID: R487771
	Lake Charles FEC ID number of contributing federal political committee.	C	70605	Amount of Each Receipt this Period 50.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 484.00	
s	UBTOTAL of Receipts This Page (optional)			143.00
			<u>-</u>	

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 149 / 173
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
-	_		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Sta	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and add	aress or any political committee to	solicit contributions from such committee.
\rangle	National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
	Full Name (Last, First, Middle Initial)			
۹.	Mr. Terry R. Thayer			Date of Receipt
	Mailing Address 353 Prospector Trail			10 10 2007
	City	State	Zip Code	Transaction ID: R487405
	Bozeman	MT	59718-7974	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.20
	Name of Employer Self-employed	Occupation	1	Payroll Deduction
	-	Insurance		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		201.60	
3.	Full Name (Last, First, Middle Initial) Mr. Terry R. Thayer			Date of Receipt
	Mailing Address 353 Prospector Trail			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R491045
	Bozeman	MT	59718-7974	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		-25.20 RT
	Name of Employer Self-employed	Occupation		
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	_
	Primary General	riggregate		
	Other (specify) ▼	0 0	201.60	
•	Full Name (Last, First, Middle Initial) Mr. Neal A. Thomas, CLU, ChFC			Date of Receipt
٠.	Mailing Address 4435 E. Eden			M M / D D / Y Y Y Y
				10 25 2007
	City Lincoln	State NE	Zip Code 68506-2541	Transaction ID: R491464
	FEC ID number of contributing		00000-2041	Amount of Each Receipt this Period
	federal political committee.	C		300.00
	Name of Employer Self-employed	Occupation		Check
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	-
	Primary General	, iggi ogale		
	Other (specify) ▼		300.00	
s	UBTOTAL of Receipts This Page (optional)			300.00
_	OTAL This Davied (last consult in Process)	-1. 3		
- 1	OTAL This Period (last page this line number or	пу)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F	inancial A	dvisors Political Action Com	mit-
Α.	Full Name (Last, First, Middle Initial) Mr. Wayne E. Thomas, CLU, ChFC Mailing Address 29 Cycas Drive City Kenner FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State LA C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼	0 0	210.00	
3.	Full Name (Last, First, Middle Initial) Mr. Earl A. Thompson, RFC, LUTCF Mailing Address 21014 Pricewood Manor City Cypress FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State TX C Occupation Insurance		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R487489 Amount of Each Receipt this Period 47.00 Payroll Deduction
D.	Full Name (Last, First, Middle Initial) Mr. Robert D. Thunselle, FIC, CLU Mailing Address 4020 Gannett #3 City Casper FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State WY C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R489998 Amount of Each Receipt this Period 27.50 Payroll Deduction
S	UBTOTAL of Receipts This Page (optional)		>	95.50
T	OTAL This Period (last page this line number or	nly))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 173 (check only one) X
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial A	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. Brad Tison, CLU, ChFC, Mailing Address 3216 Southern Woods D	rive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487449
	Des Moines	IA	50321	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.40
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 504.00	
3.	Full Name (Last, First, Middle Initial) Mr. John D. Traynham, LUTCF			Date of Receipt
	Mailing Address 210 Timber Lane	10 10 Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: R487770
	Anderson	SC	29621-1126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		22.50 Payroll Deduction
	Name of Employer Self-employed	Occupation		ayron beddenon
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	225.00	
) .	Full Name (Last, First, Middle Initial) Mr. Robert W. Tull, CLU, ChFC			Date of Receipt
	Mailing Address 7815 Eagle Rock, N.E.			10 10 2007
	City	State	Zip Code	Transaction ID: R487620
	Albuquerque	NM	87122	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.50 Payroll Deduction
	Name of Employer Self-employed	Occupation		1 ayıdı Deduction
	Receipt For: Primary General Other (specify) ▼		y Year-to-Date ▼ 255.00	
s	UBTOTAL of Receipts This Page (optional)			98.40
т.	OTAL This Period (last page this line number on	v)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 152 / 173
ITEMIZED RECEIPTS			or each category of the	(check only one)
••	LIMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	ay information copied from such Reports and Sta	temente may	y not be sold or used by any perso	
or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	osolicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and F tee	inancial A	dvisors Political Action Com	mit-
A.	<u></u>			Date of Receipt
	Mailing Address 1070 South Bosque Loo	p		10 10 2007
	City	State	Zip Code	Transaction ID: R490170
	Bosque Farms	NM	87068-9063	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:		Year-to-Date V	
	Primary General			1
	Other (specify) ▼	0 0	450.00	
В.	Full Name (Last, First, Middle Initial) Mr. Bruce S. Udell, CLU, ChFC,			Date of Receipt
ъ.	Mailing Address 393 North Point Road #9	901		M M / D D / Y Y Y Y
		10 01 2007		
	City	State	Zip Code	Transaction ID: R490503
	Osprey	<u>FL</u>	34229-6827	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee			100.00
	federal political committee.			Charle
	Name of Employer Self-employed	Occupation		Check
		Insurance		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		1362.50	
_	Full Name (Last, First, Middle Initial)			Date of Descipt
C.	Mr. Bruce S. Udell, CLU, ChFC, Mailing Address 393 North Point Road #9	901		Date of Receipt
		3 01		10 10 2007
	City	State	Zip Code	Transaction ID: R490766
	Osprey	<u>FL</u>	34229-6827	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1262.50
	Name of Employer Self-employed	Occupation Insurance		Credit Card
	Receipt For:	1	Year-to-Date ▼	
	Primary General		1262.50	1
	Other (specify)	0 0	1362.50	1
				1407.50
S	UBTOTAL of Receipts This Page (optional)		······	- 1707.00
_	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
	O	, ,	13 14 15 16 17
Any information copied from such Reports and sor for commercial purposes, other than using the	Statements mage e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
National Association of Insurance and tee	d Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. Brian Urie, CFP			Date of Receipt
Mailing Address 2825 E. Cottonwood I STE 470			10 10 2007
City <u>Salt Lake City</u>	State UT	Zip Code 84121	Transaction ID: R487216
FEC ID number of contributing federal political committee.	C	04121	Amount of Each Receipt this Period 2.50
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
Receipt For: ☐ Primary ☐ General Other (specify) ▼		e Year-to-Date ▼ 228.00	
Full Name (Last, First, Middle Initial) 3. Mr. Howard Raymond Utz, LUTCF			Date of Receipt
Mailing Address PO Box 480			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R490040
Mars	PA	16046	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5.00
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		387.50	
Full Name (Last, First, Middle Initial) Mr. Richard D. Vonderlage, CSA, LUTCF	_1		Date of Receipt
Mailing Address 15202 Sprague St			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: R489859
Omaha	NE	68116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	420.00	
SUBTOTAL of Receipts This Page (optional) .			49.50
TOTAL This Period (last page this line numbe	r only)	<u> </u>	
(.act page the mile humbe	j /		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and ado	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee	nancial Ad	dvisors Political Action Com	mit-
۹.	Full Name (Last, First, Middle Initial) Mr. Thomas D. Voshall Mailing Address 426 Towne Valley Dr City State		Zip Code	Date of Receipt 1 0 1 0 2 0 0 7 Transaction ID: R488096
	Woodstock FEC ID number of contributing federal political committee.	GA C	30188-2636	Amount of Each Receipt this Period 25.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
3.	Full Name (Last, First, Middle Initial) Mr. Craig S. Walker Mailing Address 622 Main St.			Date of Receipt M M J D D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Patterson FEC ID number of contributing federal political committee.	State LA	Zip Code 70392-4115	Transaction ID: R490829 Amount of Each Receipt this Period 250.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Check
D.	Full Name (Last, First, Middle Initial) Ms. Sharon S. Walls, CLU,ChFC,L Mailing Address 1831 Frontier Rd City	State	Zip Code	Date of Receipt M
	Bennington FEC ID number of contributing federal political committee.	KS C	67422-9063	Amount of Each Receipt this Period 18.00
	Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
s	UBTOTAL of Receipts This Page (optional)			293.00
T	OTAL This Period (last page this line number onl	v)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 155 / 173
	EMIZED RECEIPTS		or each category of the	(check only one)
••	EMIZED RESERVES		Detailed Summary Page	X 11a 11b 11c 12
Δ,	av information copied from such Poports and State	omonte may	y not be cold or used by any pers	13 14 15 16 17
or	ny information copied from such Reports and State for commercial purposes, other than using the na	me and add	dress of any political committee to	osolicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	National Association of Insurance and Fi tee	nancial Ad	dvisors Political Action Com	mit-
A.	Full Name (Last, First, Middle Initial) Mr. Brian P. Walsh, CLU, ChFC,			Date of Receipt
	Mailing Address 547 Wayfield			10 15 2007
	City	State	Zip Code	Transaction ID: R490961
	Wynnewood PA FEC ID number of contributing federal political committee. Name of Employer Occu Self-employed		19096-2615	Amount of Each Receipt this Period
				250.00
			n e Agent	Credit Card
	Receipt For:		Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Mr. Mark R. Warren, LUTCF			Date of Receipt
	Mailing Address 3603 Grandview	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: R490342
	Plainview	TX	79072-6625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		400.00	1
	Other (specify) ▼	0 0	436.00	
C.	Full Name (Last, First, Middle Initial) Ms. Carolyn R. Watson, LUTCF			Date of Receipt
	Mailing Address 2032 Hollis			10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487932
	Abilene	TX	79605-5726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		55.00
	Name of Employer Self-employed	Occupation Insurance		Payroll Deduction
	Receipt For:		Year-to-Date ▼	
	Primary General		545.00	1
	Other (specify)		515.00	-
s	SUBTOTAL of Receipts This Page (optional)			355.00
\vdash	,		'	
T	OTAL This Period (last page this line number only	v)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and F			
Α.	Full Name (Last, First, Middle Initial) Mr. Charles A. Webb Mailing Address 2516 Longview Ave. City Roanoke FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For:	State VA C Occupation Insurance		Date of Receipt M M J D D Z D O 7 Transaction ID: R487333 Amount of Each Receipt this Period 42.50 Payroll Deduction
	Primary General Other (specify) ▼	Aggregate	425.00	
3.	Full Name (Last, First, Middle Initial) Mr. S. Mark Weeks, LUTCF, CLU Mailing Address 1389 South 500 East City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer	State UT C	Zip Code 84105-2043	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼	Insurance Aggregate	e Agent e Year-to-Date ▼ 425.00	
D.	Full Name (Last, First, Middle Initial) Mr. Matthew C. Weider, CLU,ChFC Mailing Address 6855 Compton Heights City	Circle State	Zip Code	Date of Receipt M M
	Clifton FEC ID number of contributing federal political committee.	C	20124	Amount of Each Receipt this Period 50.40
	Name of Employer Self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Insurance Aggregate		Payroll Deduction
SI	UBTOTAL of Receipts This Page (optional)			117.90
T	OTAL This Period (last page this line number or	nly))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 157 / 173
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
-	:==		Detailed Summary Page	X 11a
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	NAME OF COMMITTEE (In Full)	ame and add	aress or any political committee to	Solicit contributions from such committee.
\rangle	National Association of Insurance and F tee	inancial A	dvisors Political Action Com	nit-
	Full Name (Last, First, Middle Initial)			5. (5.)
٩.	Mr. Daniel J. Wells, LUTCF Mailing Address 18830 Los Hermanos Ra	anch Rd		Date of Receipt
				10 10 2007
	City Valley Center	State CA	Zip Code 92082-6808	Transaction ID: R487966
	Valley Center FEC ID number of contributing		92082-0808	Amount of Each Receipt this Period
	federal political committee.	C		47.50
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	-
	Primary General	Aggregate		
	Other (specify) ▼		662.50	
3.	Full Name (Last, First, Middle Initial) Mr. Marlin D. Wells, CLU, ChFC,			Date of Receipt
	Mailing Address 2201 N. Washington			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R487754
	Roswell	NM	88201-3377	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer Self-employed	Occupation	1	Payroll Deduction
		Insurance	-	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		300.00	
	Full Name (Last, First, Middle Initial)			
j.	Mr. Lester E. Westgard, CLU Mailing Address 2714 26th Ave SW			Date of Receipt
	2/14 ZOIN AVE SW			10 10 2007
	City	State	Zip Code	Transaction ID: R487563
	Fargo	ND	58103-5006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Self-employed	Occupation		Payroll Deduction
	Receipt For:	Insurance	e Agent e Year-to-Date ▼	-
	Primary General	Ayyıeyale		
	Other (specify) ▼		600.00	
S	UBTOTAL of Receipts This Page (optional)			137.50
	(optional)			
T	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		158 / 173	
ITEMIZED RECEIPTS			or each category of the	(check only one)	_
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c	12
_				13 14 15	16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contri- solicit contributions from such com	butions mittee.
	NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
$ \rangle$	National Association of Insurance and Fi	inancial Ad	dvisors Political Action Com	mit-	
	Full Name (Last, First, Middle Initial)				
A.	Mr. Irwin R. Wetnight, Jr.,CLU			Date of Receipt	
	Mailing Address 95 W. Prescott Ave.				2007
	City	Ctata	7in Code		2007
	City Clovis	State CA	Zip Code	Transaction ID: R489612	Deview
		CA	93619-8743	Amount of Each Receipt this	Period
	FEC ID number of contributing federal political committee.	C			21.00
	Name of Employer	Occupation	า	Payroll Deduction	
	Self-employed	Insurance	e Agent		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		210.00	1	
	Other (specify)		210.00		
В.	Full Name (Last, First, Middle Initial) Mr. William T. Whitmore, Jr., LUTCF			Date of Receipt	
٥.	Mailing Address P. O. Box 4748			T	YYY
	1. O. DOX 4740				2007
	City	State	Zip Code	Transaction ID: R489586	
	Virginia Beach	VA	23454-0748	Amount of Each Receipt this	Period
	FEC ID number of contributing				50.00
	federal political committee.	C			30.00
	Name of Employer	Occupation	า	Payroll Deduction	
	Name of Employer Self-employed	Insurance			
	Receipt For:		Year-to-Date ▼		
	Primary General	00 0		1	
	Other (specify) ▼	, ,	550.00		
_	Full Name (Last, First, Middle Initial)			Data of Descript	
C.	Mr. Irv Wiese, CLU, ChFC, Mailing Address 318 Stamford Bridge Rd			Date of Receipt	/ ' Y ' Y
	Mailing Address 318 Stamford Bridge Rd				2007
	City	State	Zip Code	Transaction ID: R488142	
	Columbia	SC	29212	Amount of Each Receipt this	Period
	FEC ID number of contributing				42.00
	federal political committee.	C			42.00
	Name of Employer	Occupation	า	Payroll Deduction	
	Self-employed	Insurance			
	Receipt For:		Year-to-Date ▼		
	Primary General			1	
	Other (specify)		420.00		
					110.00
s	UBTOTAL of Receipts This Page (optional)				113.00
				-	
T	OTAL This Period (last page this line number on	ly)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and Staten for commercial purposes, other than using the nam	nents may ne and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee	ancial Ad	dvisors Political Action Com	mit-
A	Full Name (Last, First, Middle Initial) Mr. Michael J. Wilcox, LUTCF, CLTC Mailing Address 117 Great Brook Rd. City New Milford FEC ID number of contributing federal political committee. Name of Employer Self-employed C	State CT C Decupation nsurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Macon FEC ID number of contributing federal political committee. Name of Employer Self-employed	State GA C Decupation Insurance Aggregate		Transaction ID: R488036 Amount of Each Receipt this Period 25.00 Payroll Deduction
D.	Name of Employer Self-employed Ir	State WA C Decupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R487881 Amount of Each Receipt this Period 208.00 Payroll Deduction
s	UBTOTAL of Receipts This Page (optional)		·····	258.00
T	OTAL This Period (last page this line number only)		>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 160 / 173
IT	EMIZED RECEIPTS	or each category of the	(check only one)
•		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	y information copied from such Reports and Statements	may not be sold or used by any pers	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the name and	d address of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		
	National Association of Insurance and Financiatee	al Advisors Political Action Com	nmit-
Α.	Full Name (Last, First, Middle Initial) Mr. George W. Williams, Jr., LUTCF		Date of Receipt
Λ.	Mailing Address 4109 Woodway Dr		M M / D D / Y Y Y Y
			10 10 2007
	City State		Transaction ID: R486858
	Monroe LA	71201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00
	Name of Employer Occup	pation	Payroll Deduction
	Self-employed Insur	ance Agent	
		egate Year-to-Date ▼	
	Primary General	226.00	
	Other (specify) ▼		
В.	Full Name (Last, First, Middle Initial) Mr. Joel K. Williamson, CLU, CSA,L		Date of Receipt
	Mailing Address 1750 Cord 16		10 10 YYYYY 10 10 2007
	City State	e Zip Code	Transaction ID: R489908
	<u>Tulia</u> TX	79088	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		30.00
	Name of Employer Occup	pation	Payroll Deduction
	Salt-amployed	ance Agent	
	Receipt For: Aggre	egate Year-to-Date ▼	
	Primary General	300.00	
	Other (specify) ▼		
C.	Full Name (Last, First, Middle Initial) Mr. Lucius Williamson, Jr.,LUTCF		Date of Receipt
	Mailing Address 1111 Howe Ave., Suite 530		10 10 2007
	City State	e Zip Code	Transaction ID: R487427
	Sacramento CA	95825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		21.00
	federal political committee.		
	Name of Employer Occup	oation	Payroll Deduction
		ance Agent	
		egate Year-to-Date ▼	
	Primary General Other (specify)	210.00	
	Other (specify)	0 0 0 0 0 0 0 0	_
			76.00
S	UBTOTAL of Receipts This Page (optional)		70.00
Т	OTAL This Period (last page this line number only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) National Association of Insurance and F			
Δ.	Full Name (Last, First, Middle Initial) Mr. Cliff F. Wilson, CLU, ChFC, Mailing Address 1458 W. Bahia Court City Gilbert FEC ID number of contributing federal political committee. Name of Employer Self-employed	State AZ C Occupation Insurance		Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1260.00	
	Full Name (Last, First, Middle Initial) Mr. Randall C. Wimsatt, LUTCF Mailing Address 2460 E 20th St City Farmington FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State NM C Occupation Insurance Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) Mr. L. Nelson Wingert, CLU Mailing Address 418 Gettysburg Pike City Mechanicsburg FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify)	State PA C Occupation Insurance Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R488011 Amount of Each Receipt this Period 25.00 Payroll Deduction
SI	JBTOTAL of Receipts This Page (optional)		······	176.20
T	OTAL This Period (last page this line number or	nly))	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 162/1/3
ITEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
-		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
National Association of Insurance and I tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) Mr. Larry J. Winkelhake, CLU, ChFC			Date of Receipt
Mailing Address 18600 Longview Ct			10 10 2007
City Brookfield	State WI	Zip Code	Transaction ID: R489610
FEC ID number of contributing federal political committee.	C	53045	Amount of Each Receipt this Period 90.00
Name of Employer Self-employed	Occupatio Insuranc		Payroll Deduction
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 900.00	
Full Name (Last, First, Middle Initial) Mr. Benjamin Bunn Woodard, Jr.			Date of Receipt
Mailing Address 109 Bristol Court			10 10 / 2007
City Peoles Mount	State NC	Zip Code	Transaction ID: R487987
Rocky Mount	INC	27803-1203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		46.75 Payroll Deduction
Name of Employer Self-employed	Occupatio Insuranc		Fayron Deduction
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		467.50	
Full Name (Last, First, Middle Initial) . Mr. Mark L. Yavornitzki, CAE			Date of Receipt
Mailing Address 14 Bridle PI.			10 10 2007
City	State	Zip Code	Transaction ID: R490473
E. Greenbush	NY	12061-1111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Self-employed	Occupatio Insuranc	e Agent	Payroll Deduction
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)			161.75
TOTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 163 / 173
TEMIZED RECEIPTS		or each category of the	(check only one)
· · · · · · · · · · · · · · · · · · ·		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and Si	tatements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	Financial A	aluda ana Daltata di Aldrido G	
National Association of Insurance and tee	rınancıal A	avisors Political Action Com	mit-
Full Name (Last, First, Middle Initial)			
Mr. Edward A. Zabielski, Jr.			Date of Receipt
Mailing Address 104 Clay Ct.			10 10 2007
City	State	Zip Code	Transaction ID: R490456
Landenberg	PA	19350	Amount of Each Receipt this Period
FEC ID number of contributing	С		105.00
federal political committee.			
Name of Employer Self-employed	Occupation		Payroll Deduction
	Insuranc	e Agent e Year-to-Date ▼	_
Receipt For: Primary General	Aggregate		1
Other (specify) ▼		1100.00	
Full Name (Last, First, Middle Initial) 3. Mr. Charles D. Zaleski, CLU, ChFC			Date of Receipt
Mailing Address 28400 Ridgethorne Ct			M M / D D / Y Y Y Y
	0/ :	7: 0.1	10 10 2007
City	State CA	Zip Code	Transaction ID: R489690
Rancho Palos Verde		90275-3258	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	<u> </u>	42.00
Name of Employer	Occupation	n	Payroll Deduction
Name of Employer Self-employed	Insurance		
Receipt For:		e Year-to-Date ▼	
Primary General		420.00	1
Other (specify) ▼		120.00	1
Full Name (Last, First, Middle Initial)	1		1
Mr. Alan R. Zalewski, CLU, ChFC,			Date of Receipt
Mailing Address 6908 North 27th Street			10 10 2007
City	State	Zip Code	Transaction ID: R488215
Tacoma	WA	98407-1002	Amount of Each Receipt this Period
FEC ID number of contributing	С		50.00
federal political committee.			
Name of Employer Self-employed	Occupation		Payroll Deduction
	Insuranc	e Agent e Year-to-Date ▼	_
Receipt For: Primary General	Aggregate		1
Other (specify) ▼		500.00	
CLIPTOTAL of Descripts This Description III			197.00
SUBTOTAL of Receipts This Page (optional)		·······	
TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 164 / 173
TEMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		.	
National Association of Insurance and I tee	Financial A	dvisors Political Action Com	mit-
Full Name (Last, First, Middle Initial) A. Mr. Theodore J. Zouzounis, CLU			Date of Receipt
Mailing Address 820 Mariposa Rd			M M / D D / Y Y Y Y
			10 10 2007
City Lafayette	State CA	Zip Code 94549	Transaction ID: R489585 Amount of Each Receipt this Period
FEC ID number of contributing		34040	
federal political committee.	C		42.50
Name of Employer Self-employed	Occupation		Payroll Deduction
· · · · · · · · · · · · · · · · · · ·	Insurance	•	_
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
Other (specify)	0 0	425.00	
Full Name (Last, First, Middle Initial)			
Mr. Jeffrey Zuzolo, CLU, ChFC			Date of Receipt
Mailing Address 29 S. Main St., Ste 201			10 18 2007
City	State	Zip Code	Transaction ID: R491174
W Hartford	CT	06107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
	10		Check
Name of Employer Self-employed	Occupation		
Receipt For:		e Year-to-Date ▼	
Primary General	1	500.00	1
Other (specify) ▼		0 0 0 0 0 0 0	
Full Name (Last, First, Middle Initial) Mr. H. Keith de Noble, LUTCF, CLU			Date of Receipt
Mailing Address 13200 W Markham Stre	et, Suite 1	05	M M M / D D / Y Y Y Y
			10 10 2007
City Little Rock	State AR	Zip Code 72211-3285	Transaction ID: R490137 Amount of Each Receipt this Period
FEC ID number of contributing			
federal political committee.	C		36.00
Name of Employer Self-employed	Occupation		Payroll Deduction
Receipt For:	Insurance	e Agent e Year-to-Date ▼	-
Primary General	Aggregate		1
Other (specify) ▼	0 0	312.00	
			578.50
SUBTOTAL of Receipts This Page (optional)		·····	3/6.30
TOTAL This Period (last page this line number o	nly)		33978.51

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 173 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name a	nts may not be sold or used by any perso and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Insurance and Finan tee	icial Advisors Political Action Comr	nit-
Full Name (Last, First, Middle Initial) CC Services Inc Country PAC Mailing Address 1705 Towanda Avenue City Si	tate Zip Code	Date of Receipt M
Bloomington IL FEC ID number of contributing federal political committee. C	61701	Amount of Each Receipt this Period 2500.00 Check
Receipt For: Primary Other (specify) Age	gregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	>	2500.00
TOTAL This Period (last page this line number only)	•	2500.00

Image# 27990906190

S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 166 / 1	70
	•	Use seperate schedule(s)	FOR LINE NUMBER: PAGE 166 / 1 (check only one)	/3
Ш	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 22 23 24 25 7	7 26
		Betailed Carrinary 1 age	27 28a 28b 28c 29	30b
			by any person for the purpose of solicating contributions	
or f	or commercial purposes, other than using th	ne name and address of any political co	committee to solicit contributions from such committee	
Λ	NAME OF COMMITTEE (In Full)			
17	National Association of Insurance and	d Financial Advisors Political Ad	ction Commit-	
\mathbb{L}	tee			
	Full Name (Last, First, Middle Initial)		Transaction ID: D9526	
Α.	First Union Bank		Date of Disbursement	
	Mailing Address One First Union Ce	nata.	10 29 7 2007	
	Mailing Address One First Union Ce	enter		_
	City	State Zip Code	Amount of Each Disbursement this Pe	riod
	Charlotte	NC 28288-1164		-
	Purpose of Disbursement		1867.48	3
	Bank Charges			
	Candidate Name		Category/	
			Туре	
		isbursement For:		
	Senate	Primary General		
	State: President District:	Other (specify)		
_				
В.	Full Name (Last, First, Middle Initial) NAIFA		Transaction ID: D9527	
٥.	NAIFA		Date of Disbursement	
	Mailing Address 2901 Telestar Cour	+	10 M / D 2 D / Y Y Y O Y Y	
		•		
	City	State Zip Code	Amount of Each Disbursement this Per	riod
	Falls Church	VA 22042-1205	45000.00	
	Purpose of Disbursement		45093.86)
	Payroll, Benefits, Supplies, Copies, Candidate Name		2.1	
	Candidate Name		Category/ Type	
	Office Sought: House Di	isbursement For:	1,700	
	Senate	Primary General	etc.	
	President	Other (specify)		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	46961.34
TOTAL This Period (last page this line number only)	•	46961.34

SCHEDULE B (FEC Form 3X)

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)		OR LINE neck on	: NUMBEI lv one)	≺ :	L PA	AGE 1	6//1	/3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23 28b	24 28c	\vdash	5	26 30b
Any Information copied from such Reports and Statem									_
or for commercial purposes, other than using the name	e and address of any political co	ommitt	ee to so	olicit contri	butions fro	om such o	commit	tee	
NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee	ncial Advisors Political Ac	ction (Comm	it-					
Full Name (Last, First, Middle Initial)				Transa	action ID:	D9489			
A. Baker for Congress Committee					f Disburse				
Mailing Address Post Office Box 1694				10	/ D	2 /	ž0	ŏ 7 [×]	
•	State Zip Code			Amour	nt of Each	Disburse	ement t	nis Per	riod
	LA 70821						20	00.00	
Purpose of Disbursement Contr. Richard H. Baker (LA-6-R-US		·		_				30.00	
Candidate Name Richard H. Baker		Categ	-						
X	ment For: 2008 Primary General Other (specify)			House))				
State: LA District: 06									
Full Name (Last, First, Middle Initial)					action ID:				
3. Ed Royce for Congress					of Disburse	ement	/ · · ·	Y	1
Mailing Address P.O. Box 2525				1 0	1	9 /	20	ŏ7 [°]	
•	State Zip Code			Amour	nt of Each	Disburse	ement t	nis Per	riod
Orange Purpose of Disbursement	CA 92859		_	-	25	00.00			
Contr. Edward R. Royce (CA-40-R-US				-		-		0	
Candidate Name Edward R. Royce		Categ Typ	-						
Senate X President	ment For: 2008 Primary General Other (specify)			House	e)				
State: CA District: 40									
Full Name (Last, First, Middle Initial) Friends of John Tanner				Date o	action ID: f Disburse	ement			
Mailing Address Post Office Box 1994				10	/ D	0 /	ž0	ŏ7 [°]	
City Union City	State Zip Code TN 38281			Amour	nt of Each	Disburse			-
Purpose of Disbursement Contr. John S. Tanner (TN-8-D-US House)							50	00.00	
Candidate Name John S. Tanner		Categ Typ							
	ment For: 2008 Primary General Other (specify)								
State. 114 District. 00									
SUBTOTAL of Disbursements This Page (optional)				ļ.			950	00.00	
TOTAL This Period (last page this line number only)			•	L.					

SCHEDULE B (FEC Form 3X)

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)		OR LINE neck onl	NUMBE	H:	L P	AGE	168 /	1/3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23 28b	24 28c	\Box	25 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam									
NAME OF COMMITTEE (In Full)	e and address of any political co	OHIHHILL	.ee 10 SC	MCIL COITLI	ibulions n	OIII SUCII	COITIII	iillee	
National Association of Insurance and Fin	ancial Advisors Political Ac	ction (Comm	it-					
Full Name (Last, First, Middle Initial)				Trans	action ID	: D9486			
Friends of Kent Conrad				Date o	of Disburs		V V	V .	V
Mailing Address PO Box 812				1 0		12 /	2	0 ŏ 7	
City	State Zip Code			Amou	nt of Each	n Disburs	ement	this P	eriod
Bismarck Purpose of Disbursement	ND 58502						5	000.0	0
Contr. Kent Conrad (ND-D-US Senate)		۰			-	•			
Candidate Name Kent Conrad		Categ Typ	-						
	ement For: 2012								
X Senate X President	Primary General Other (specify) ▼								
State: ND District:									
Full Name (Last, First, Middle Initial)					action ID				
Hall For Congress Committee					of Disburs		V V	· V	V
Mailing Address PO Box 711				1 0	, J	18	2	0 ŏ 7	
City	State Zip Code			Amou	nt of Each	n Disburs	ement	this P	eriod
Purpose of Disbursement	ockwall TX 75087						2	500.0	0
Contr. Ralph M. Hall (TX-4-R-US House)									
Candidate Name Ralph M. Hall		Categ Typ	-						
, X	ement For: 2008								
Senate X President	Primary General Other (specify) ▼								
State: TX District: 04	(-) , \								
Full Name (Last, First, Middle Initial) - Hall of Fame PAC					action ID				
Mailing Address 1717 Dixie Highway. Sui	100			1 ^M 0	M / D	1 9 /	Y Y	0 ŏ 7	Y
Mailing Address 1717 Dixie Highway, Sui	le 100					ا لنا			
City State Zip Code Ft. Wright KY 41011				Amou	nt of Each	n Disburs	ement	this P	eriod
Purpose of Disbursement	41011		-				5	0.00	0
Contr. Hall of Fame PAC (PAC to PAC									
Candidate Name Category/ Type									
Office Sought: House Disburse	ement For: 2007	- 71		oontri	hution)				
Senate	Primary General			CONTIN	bution)				
State: District: X	Other (specify)								
SUBTOTAL of Disbursements This Page (optional)				<u></u>			125	500.0	U
TOTAL This Period (last page this line number only)			•	L					

	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)			NUMBEI	R:	P	AGE	169 /	173			
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 <u>`</u>	k only 1b 7	22 28a	X 23 28b	24 28c	Н	25 29	26 30b			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name									5			
\rangle	NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee	<u> </u>											
۹.	Full Name (Last, First, Middle Initial) Issa for Congress Mailing Address P O Box 760				Date c	action ID of Disburs			0 ŏ 7	Y			
	•	State Zip Code CA 92085			Amoui	nt of Each	n Disburs	ement	this P	eriod			
	Purpose of Disbursement Contr. Darrell E. Issa (CA-49-R-US							. 10	0.000	00			
	Candidate Name Darrell E. Issa Office Sought: X House Disburse	ment For: 2008	Category Type	//									
		Primary General Other (specify) ▼			House	e)							
3.	Full Name (Last, First, Middle Initial) John Lewis for Congress Cmte					action ID	ement						
	ailing Address 1520 Pinehurst Drive, SW					10 M / D D / Y Y Y O O 7							
	Atlanta	State Zip Code GA 30311			Amount of Each Disbursement this Pe								
	Purpose of Disbursement Contr. John Lewis (GA-5-D-US House) Candidate Name John Lewis		Category	"/		•			000.0				
	Office Sought: X House Disburse	ment For: 2008 Primary General Other (specify)	Type										
Э.	Full Name (Last, First, Middle Initial) Latta for Congress Committee				Date o	action ID	ement						
	Mailing Address 300 North Main Street		1 ^M 0	M / D	26	Ý Ž	0 ŏ 7	Y					
	Bowling Green	State Zip Code OH 43402			Amoui	nt of Each	n Disburs		this P				
	Purpose of Disbursement Contr. Robert E. Latta (OH-5-R-US House) Candidate Name Category/								500.0	,0			
		Primary General	Туре										
	State: OH District: 05	Other (specify)											
S	UBTOTAL of Disbursements This Page (optional) .			<u> </u>	L.			60	0.00	0			
Т	OTAL This Period (last page this line number only)			•									

SCHEDULE B (FECFOIIII 3X)	Use seperate schedule(s)	FOR LINE N	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) Pat Roberts for Senate Mailing Address PO Box 433			Transaction ID: D9482 Date of Disbursement M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code KS 67530		Amount of Each Disbursement this Period
Purpose of Disbursement Contr. Pat Roberts (KS-R-US Senate)		• •	5000.00
Candidate Name Pat Roberts Office Sought: House Disburse	ment For: 2008	Category/ Type	
• 🗎	Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) 3. People for English			Transaction ID: D9490 Date of Disbursement
Mailing Address PO Box 1940			$\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 0 \end{smallmatrix} \begin{smallmatrix} M \\ \end{smallmatrix} \begin{smallmatrix} I \\ I \end{smallmatrix} 0 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ 1 \end{smallmatrix} 2 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} 0 \end{smallmatrix} 0 \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 0 \begin{smallmatrix} Y \\ 0 \end{smallmatrix} 0 \begin{smallmatrix} Y \\ I \end{smallmatrix}$
Erie	State Zip Code PA 16507		Amount of Each Disbursement this Period 4000.00
Purpose of Disbursement Contr. Phil English (PA-3-R-US House) Candidate Name		Category/	4000.00
Phil English		Type	
	ment For: 2008 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Ron Lewis For Congress			Transaction ID: D9500 Date of Disbursement
Mailing Address P.O. Box 307			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
Elizabethtown	State Zip Code KY 42702		Amount of Each Disbursement this Period
Purpose of Disbursement Contr. Ron Lewis (KY-2-R-US House) Candidate Name		Category/	1000.00
Ron Lewis		Type	
9 1	ment For: 2008 Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional) .		•	10000.00
TOTAL This Period (last page this line number only)			

Image# 27990906195

	<u> </u>				
S	CHEDULE B (FEC Form 3X)) Use sepe	erate schedule(s)		NUMBER: PAGE 171 / 173
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 27	y one) 22 X 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and for commercial purposes, other than using t	•		, , ,	, ,
\	NAME OF COMMITTEE (In Full)				
	National Association of Insurance artee	nd Financial Adv	isors Political Ac	tion Commi	t-
	Full Name (Last, First, Middle Initial)				Transaction ID: D9488
۹.	Sam Farr for Congress				Date of Disbursement
	Mailing Address 555 Capitol Mall S	uite 1425			10 12 7 2007
	City Sacramento	State CA	Zip Code 95814		Amount of Each Disbursement this Period
	Purpose of Disbursement Contr. Sam Farr (CA-17-D-US House)				1000.00
	Candidate Name Sam Farr			Category/ Type	
	Office Sought: X House Senate President	Disbursement For: X Primary Other (spe	2008 General		
	State: CA District: 17		•		

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	<u> </u>	39000.00

Image# 27990906196

90	CHEDULE B (FEC Form 3X)							_							
	•		rate schedule(s)		-	NE NUMBER: PAGE 172 / 173 only one)								3	
П	EMIZED DISBURSEMENTS		ategory of the Summary Page		7 21b	\Box	22	П	23	\Box	24		25		1 26
		Detailed	bullillary r age		27	X	28a	Н	28b	Н	28c	Н	29		30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name													s	
\setminus	NAME OF COMMITTEE (In Full)														
	National Association of Insurance and Finatee	ncial Advi	sors Political	Action	Comi	nit-									
	Full Name (Last, First, Middle Initial)						Trans	acti	on ID	: D9	9494				
Α.	Mr. Francis W. Codr						Date	of Di			ent	V		V	
	Mailing Address 3434 North 140th Circle						1 0	IVI	1	8	ľĽ	2	0 ŏ 7	7 '	
	<i>y</i>	State	Zip Code				Amou	int o	f Each	n Dis	burse	men	t this I	Peri	od
		NE	68154				-	-	-			-			
	Purpose of Disbursement Refund to Individual						<u></u>		•			-	200.	UU	
	Candidate Name			Cate Ty											
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼												
_															
В.	Full Name (Last, First, Middle Initial) Mr. Thomas M. Cothron							of Di	sburs	eme	_				
	Mailing Address 4280 SW 20th Ave		1 ^M 0	М	[′]) 4	/ L	ž	0 0 7	7 ^Y					
	<i>y</i>	State Zip Code FL 34474-5950							Amount of Each Disbursement this Period						od
	Purpose of Disbursement Refund to Individual					500.00									
	Candidate Name			Cate Ty											
	Office Sought: House Disburse	ment For:													
	Senate	Primary	General												
	President	Other (spec	cify) 🔻												
	State: District:														

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	700.00
TOTAL This Period (last page this line number only)	•	700.00

SCHEDULE D (FEC Form 3X)

(Use separate

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DEBTS AND OBLIGATIONS		schedule(s) for each	FOR LINE NUMBER: (check only one) 9
Excluding Loans NAME OF COMMITTEE (In Full)		numbered line)	X 10
National Association of Insurance and Financial tee	Advisors Political Action Con	nmit-	
A. Full Name (Last, First, Middle Initial) of Debtor or NAIFA		ebt (Purpose): enefits, Suppli- s, etc	
Mailing Address 2901 Telestar Court		ез, ооріє.	3, 610
City State Falls Church VA	ZIP Code 22042-1205		
Outstanding Balance Beginning This Period		Tra	nsaction ID: DD#7711
73770.12			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	45093.86		28676.26
1) SUBTOTALS This Period This Page (optional)		•	28676.26
2) TOTALS This Period (last page this line number only	y)	>	28676.26
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	>	